

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 19, 2007
Secretary of State

DOCUMENT# N04000004030

Entity Name: BUCKEYE POINTE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**3314 VERBENA AVENUE
WINTER HAVEN, FL 33881**New Principal Place of Business:**3087 BUCKEYE POINTE DRIVE
WINTER HAVEN, FL 33881**Current Mailing Address:**3314 VERBENA AVENUE
WINTER HAVEN, FL 33881**New Mailing Address:**PO BOX 3967
WINTER HAVEN, FL 33885**FEI Number:** 20-1961095**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROTTISCHILD, STANLEY
3065 BUCKEYEE POINT DR.
WINTER HAVEN, FL 33881 US**Name and Address of New Registered Agent:**BRADER, BRENDA
3087 BUCKEYE POINTE DR
WINTER HAVEN, FL 33881 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: BRENDA BRADER

06/19/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: ROTHSCHILD, STANLEY
Address: 3065 BUCKEYE POINTE DRIVE
City-St-Zip: WINTER HAVEN, FL 33881

Title: T () Delete
Name: JACKSON, BARBARA
Address: 3045 BUCKEYE POINTE DRIVE
City-St-Zip: WINTER HAVEN, FL 33881

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BRADER, BRENDA
Address: 3087 BUCKEYE POINTE DR
City-St-Zip: WINTER HAVEN, FL 33881

Title: VP (X) Change () Addition
Name: RHODES, TRACY
Address: 3316 VERBENA AVE
City-St-Zip: WINTER HAVEN, FL 33881

Title: SEC () Change (X) Addition
Name: BRADER, DENNIS
Address: 3087 BUCKEYE POINTE
City-St-Zip: WINTER HAVEN, FL 33881

Title: TRES () Change (X) Addition
Name: WARNICK, BONNIE
Address: 3109 BUCKEYE POINTE DR
City-St-Zip: WINTER HAVEN, FL 33881

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BONNIE WARNICK

TRES

06/19/2007

Electronic Signature of Signing Officer or Director

Date