2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 26, 2006 8:00 am
Secretary of State
05-03-2006 90196 026 ****61.25

DOCUMENT # N04000010447

1. Entity Name
WEST POINTE COMMERCE CENTER HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business
~~610 SOUTH 14TH ST.~~ 628 S. 14th st
LEESBURG, FL 34748

Mailing Address
PO BOX ~~4000 21~~ 490821
LEESBURG, FL 34749-0821

04192006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 20-2941944 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KIRSTE, M. MEREDITH
610 E. MAIN ST.
LEESBURG, FL 34748

Mailing address please ⟶

7. Name and Address of New Registered Agent

Name: MARTIN G BOYD
Street Address (P.O. Box Number is Not Acceptable): ~~P.O. Box 490821~~
628 South 14th Street
City: Leesburg FL Zip Code: 34748

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: MARTIN G BOYD Martin G Boyd 4/24/2006
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTD BOYD, MARTIN G ~~610 SOUTH 14TH ST.~~ P.O. Box 490821 LEESBURG, FL ~~34748~~ 34749-0821	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BOYD, martin 628 South 14th st Leesburg Fla 34748	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BOYD, DIANNE W ~~610 SOUTH 14TH ST.~~ P.O. Box 490821 LEESBURG, FL ~~34748~~ 34749-0821	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTIN G BOYD Martin G Boyd 4/24/2006 352 787894
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #