2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 05, 2007 8:00 am
Secretary of State
02-05-2007 90098 021 ****61.25

DOCUMENT # N05000000421

1. Entity Name

SHELL POINT OF HILLSBOROUGH HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4904 EISENHOWER BLVD., SUITE 150 TAMPA FL 33634	4904 EISENHOWER BLVD., SUITE 150 TAMPA FL 33634

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
4343 ANCHOR PLAZA PKWY	4343 ANCHOR PLAZA PKWY
Suite, Apt. #, etc.: 200	Suite, Apt. #, etc.: 200
City & State: TAMPA FL	City & State: TAMPA, FL
Zip: 33634 Country: Hillsborough	Zip: 33634 Country: Hillsborough

4. FEI Number: AP-PLIED FOR ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MEZER, STEVEN H
220 SOUTH FRANKLIN STREET
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2007

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	D COLLINS, THERESA LYNN 4904 EISENHOWER BLVD., SUITE 150 TAMPA FL 33634	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☑ Change ☐ Addition 4343 Anchor Plaza Parkway, Ste 200 Tampa, FL 33634
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D TURBEVILLE, LISA 4904 EISENHOWER BLVD., SUITE 150 TAMPA FL 33634	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☑ Change ☐ Addition 4343 Anchor Plaza Parkway, Ste 200 Tampa, FL 33634
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D THOMPSON, LEE R 4904 EISENHOWER BLVD., SUITE 150 TAMPA FL 33634	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☑ Change ☐ Addition 4343 Anchor Plaza Parkway, Ste 200 Tampa, FL 33634
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TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Lee R. Thompson Pres. LEE R. THOMPSON 1-19-07 813 290-7900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #