

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001082

FILED
May 21, 2008
Secretary of State

Entity Name: CARRIAGE POINTE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

STERLING MGMT
STE 100
ST PETERSBURG, FL 33716

New Principal Place of Business:

19 E. CENTRAL BLVD.
SECOND FLOOR
ORLANDO, FL 32801

Current Mailing Address:

STERLING MGMT
STE 100
ST PETERSBURG, FL 33716

New Mailing Address:

19 E. CENTRAL BLVD.
SECOND FLOOR
ORLANDO, FL 32801

FEI Number: 11-3764375 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

COTTERILL, RONALD E ESQ
1010 N FLORIDA
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

SURFACE, FRANK
19 E. CENTRAL BLVD.
SECOND FLOOR
ORLANDO, FL 32801 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: FRANK SURFACE

05/21/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CACHON, MICHAEL
Address: 600 N. WESTSHORE BLVD., STE 400
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: CHIWRESS, WALTER
Address: 8125 TAR HOLLOW DR.
City-St-Zip: GIBSONTON, FL 33534

Title: VD () Delete
Name: EICHHOLT, DUSTY
Address: 600 N. WESTSHORE BLVD., STE 400
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MANSOUR, MAHDI
Address: 19 E. CENTRAL BLVD.
City-St-Zip: ORLANDO, FL 32801

Title: VP (X) Change () Addition
Name: SOUTHWARD, MIKE
Address: 19 E. CENTRAL BLVD.
City-St-Zip: ORLANDO, FL 32801

Title: SD (X) Change () Addition
Name: GREEN, KASEY
Address: 19 E. CENTRAL BLVD.
City-St-Zip: ORLANDO, FL 32801

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: MAHDI MANSOUR

PD

05/21/2008

Electronic Signature of Signing Officer or Director

Date