

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 01, 2010
Secretary of State

DOCUMENT# N05000003295

Entity Name: VICTORIA POINTE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224**New Principal Place of Business:****Current Mailing Address:**11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224**New Mailing Address:****FEI Number:** 20-2653970**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PENNINGTON, MOORE, WILKINSON, BELL & DUNBA
2701 NORTH ROCKY POINT DRIVE
SUITE 900
TAMPA, FL 33607 US**Name and Address of New Registered Agent:**FIRST COAST ASSOCIATION MANAGEMENT
11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224 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: MARGARET STOREY, CFO

06/01/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: WARD, CHRIS
Address: 11555 CENTRAL PARKWAY SUITE 801
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: VP
Name: GOWENS, DARREN
Address: 11555 CENTRAL PARKWAY SUITE 801
City-St-Zip: JACKSONVILLE, FL 32224

Title: S/T
Name: SPALTEN, JOSH
Address: 11555 CENTRAL PARKWAY SUITE 801
City-St-Zip: JACKSONVILLE, FL 32224

I hereby 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 all other like empowered.

SIGNATURE: MARGARET STOREY

CFO

06/01/2010

Electronic Signature of Signing Officer or Director

Date