

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009951

FILED
Apr 17, 2008
Secretary of State

Entity Name: WESTPOINTE PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1190 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32119

New Principal Place of Business:

Current Mailing Address:

1190 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32119

New Mailing Address:

FEI Number: 20-4081691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARKIN, MICHELE J
1190 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32119 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GIUMENTA, RICHARD A
Address: 4871 PALM COAST PKWY NW
City-St-Zip: PALM COAST, FL 32137

Title: DVP () Delete
Name: KOGLER, WILLIAM
Address: 24 LARAMIE DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: DST () Delete
Name: PAGAN, CHRIS
Address: 399 PALM COAST PKWY
City-St-Zip: PALM COAST, FL 32137

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KOPEC, BRIAN
Address: 393 PALM COAST PKWY STE 4
City-St-Zip: PALM COAST, FL 32137

Title: DVP (X) Change () Addition
Name: GIUMENTA, RICHARD
Address: 4871 PALM COAST PKWY NW STE 3
City-St-Zip: PALM COAST, FL 32137

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: SEVERINO, FRANK
Address: P O BOX 354491
City-St-Zip: PALM COAST, FL 32135

Title: D () Change (X) Addition
Name: BRANIFF, MICHAEL
Address: 145 CYPRESS POINT PKWY, STE 105
City-St-Zip: PALM COAST, FL 32164

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: BRIAN KOPEC

DP

04/17/2008

Electronic Signature of Signing Officer or Director

Date