

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010303

FILED
Apr 16, 2009
Secretary of State

Entity Name: APIARY POINTE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

36804 QUEEN BEE LANE
GRAND ISLAND, FL 32735

New Principal Place of Business:

36800 QUEEN BEE LANE
GRAND ISLAND, FL 32735

Current Mailing Address:

36804 QUEEN BEE LANE
GRAND ISLAND, FL 32735

New Mailing Address:

36800 QUEEN BEE LANE
GRAND ISLAND, FL 32735

FEI Number: 20-5031250

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, JOHN
36804 QUEEN BEE LANE
GRAND ISLAND, FL 32735 US

Name and Address of New Registered Agent:

HAWKINS, JORDAN
36800 QUEEN BEE LANE
GRAND ISLAND, FL 32735 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: JORDAN HAWKINS

04/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WHITE, JOHN
Address: 36804 QUEEN BEE LANE
City-St-Zip: GRAND ISLAND, FL 32735

Title: VP () Delete
Name: TROTTA, MIKE
Address: 36804 QUEEN BEE LANE
City-St-Zip: GRAND ISLAND, FL 32735

Title: DIR () Delete
Name: MCCARRAHER, MAC
Address: 36804 QUEEN BEE LANE
City-St-Zip: GRAND ISLAND, FL 32735

Title: TREA () Delete
Name: TROTTA, ANGELA
Address: 36804 QUEEN BEE LANE
City-St-Zip: GRAND ISLAND, FL 32735

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WHITE, JOHN
Address: 36800 QUEEN BEE LANE
City-St-Zip: GRAND ISLAND, FL 32735

Title: VP (X) Change () Addition
Name: MCCARRAHER, MAC
Address: 36800 QUEEN BEE LANE
City-St-Zip: GRAND ISLAND, FL 32735

Title: DIR (X) Change () Addition
Name: MCCARRAHER, MAC
Address: 36800 QUEEN BEE LANE
City-St-Zip: GRAND ISLAND, FL 32735

Title: TREA (X) Change () Addition
Name: HAWKINS, JORDAN
Address: 36800 QUEEN BEE LANE
City-St-Zip: GRAND ISLAND, FL 32735

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: JORDAN HAWKINS

TREA

04/16/2009

Electronic Signature of Signing Officer or Director

Date