## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## **DOCUMENT # N06000001868**

SABAL POINTE AT MAJESTIC PALMS RECREATION ASSOCIATION, INC.



**FILED** 

May 04, 2007 8:00 am Secretary of State

05-04-2007 90068 048 \*\*\*122.50

Principal Place of Business % PULTE HOME CORPORATION Mailing Address % PULTE HOME CORPORATION

9148 BONITA BONITA SPRI		AD, SUITE 102 135	9148 BONITA BEACH ROAD, SUITE 102 BONITA SPRINGS, FL 34135											
Principal Place of Business - No P.O. Box #     C/o Pulte Home Corporation				3. Mailing Address c/o Pulte Home Corporation										
Suite, Apt. #, etc.				Suite, Apt. #, etc.				007	Chg-NP	CR2E	037 (12/06)			
9240 Estero Park Commons Blvd.				9240 Estero Park Commons Blvd.					Olig-14i		.001 (12 00)			
City & State Estero, FL				y & State <b>ero</b> , FL		4. FEI N	Number		5487814	N	pplied For lot Applicable			
Zip Country 33928			Zip Co. 33928			intry	5. Certi	5. Certificate of Status Desired   \$8.75 Additional Fee Required						
Name and Address of Current Registered Agent							7. Name and Address of New Registered Agent							
STACKHOUSE, EDWIN D % PULTE HOME CORPORATION 9148 BONITA BEACH ROAD, SUITE 102 BONITA SPRINGS, FL 34135						Name Street Address (P.O. Box Number is Not Acceptable)								
						9240 Estero Park Commons Blvd.								
						City Estero, FL FL Zip Code 33928								
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														
Oldiwillonia.	Signature, typed	or printed name of registered agent a	and title if app	licable. (NOTE	: Registere	d Agent signature rec	quired when reinstat	ting)		DATI	<b></b>			
Filing Fee is \$61.25 Due by May 1, 2007				Election Campaign Fi Trust Fund Contributi				\$5.00 May Be Added to Fees Make check payable to Florida Department of St.						
10. OFFICERS AND DIRE						ADDITION	S/CHA	NGES TO OFF	ICERS AND	DIRECTORS I	N 10			
TITLE	PD			☐ Delete TITU		E	D			_	☐ Change	☐ Addition		
NAME	STACKHOUSE, EDWIN D				NAM	E	Stackhouse, Edwin D				Dadi Cam	Diver		
STREET ADDRESS						ET ADORESS		% Pulte Horne-9240 Estero Park Com. Blvd. Estero, FL 33928						
CITY-ST-ZIP	ST-ZIP BONITA SPRINGS, FL 34135					-ST-ZIP								
ITLE	VPD			☐ Delete	TITL	ļ.	_	•	Michael		☐ Change	☐ Addition		
NAME	MEEKS, W MICHAEL					ET ADDRESS		Meeks, Michael % Pulte Home-9240 Estero Park Com. Blvd.						
STREET ADDRESS CITY-ST-ZIP	75 07 15 00 11 11 12 12 12 12 12 12					-ST-ZIP	Estoro El 22029							
TITLE	STD	511(1100),12 01100		☐ Delete	TITL	· · · · · · · · · · · · · · · · · · ·	D:	ST			☐ Change	☐ Addition		
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TITLE				☐ Delete	TITL	E					Change	☐ Addition		
NAME					NAM	1								
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TITLE				☐ Delete	TITL						☐ Change	☐ Addition		
NAME STREET ADDRESS						EET ADDRESS								
CITY-ST-ZIP						(-ST-ZIP								
TITLE	<del>                                     </del>			☐ Delete	īПL	E					☐ Change	Addition		
NAME	İ				NAA						·			
STREET ADDRESS						EET ADDRESS								
CITY-ST-ZIP					CITY	r-st-zip								

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 equired 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 part of the relief of the corporation of the receiver or trustee empowered to execute this report as equired by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE: \_<

EDWIN D. STACKHOUSE

<u>495. 4829</u>