2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# N06000007503

Entity Name: CAMPUS POINT OF GAINESVILLE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

117 SE 16TH AVE
GAINESVILLE, FL 32601

New Principal Place of Business:

306 SW 8TH AVE
GAINESVILLE, FL 32601

Current Mailing Address:

117 SE 16TH AVE
GAINESVILLE, FL 32601

New Mailing Address:

P.O. BOX 1543
GAINESVILLE, FL 32602

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEALES, MARY
117 SE 16TH AVE
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

SEALES, MARY
306 SW 8TH AVE
GAINESVILLE, FL 32601 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: _____ 04/15/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: PINO, CHARLES T
Address: 18 NW 33RD COURT
City-St-Zip: GAINESVILLE, FL 32607

Title: VPD (X) Delete
Name: CLAUSON, RICHARD
Address: 20807 NW 70TH ACE
City-St-Zip: ALACHUA, FL 326157004

Title: SD ( ) Delete
Name: SOTOMAYOR, ELIZABETH C
Address: 1410 FALKIRK COURT
City-St-Zip: JACKSONVILLE, FL 322212818

Title: TD ( ) Delete
Name: COOPER, ALISON
Address: 1035 SW 9TH ST #E-3
City-St-Zip: GAINESILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: MARY SEALES MGR 04/15/2009
Electronic Signature of Signing Officer or Director — Date