


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90448 040 ****61.25

DOCUMENT # N06000009451	
1. Entity Name SOUTH POINTE COMMONS CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 4031 U.S. HIGHWAY ONE NE PALM BAY, FL 32905	Mailing Address 4031 U.S. HIGHWAY ONE NE PALM BAY, FL 32905
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40091035



2. Principal Place of Business - No P.O. Box # 4780 Dairy Rd	3. Mailing Address 4780 Dairy Rd
Suite, Apt. #, etc. Ste 103	Suite, Apt. #, etc. Ste 103
City & State Melbourne, FL	City & State Melbourne, FL
Zip 32904	Country USA

04182007 Chg-NP CR2E037 (12/06)

4. FEI Number
56-2613488

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BENSON, WILLIAM H. 4031 U.S. HIGHWAY ONE NE PALM BAY, FL 32905	
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7. Name and Address of New Registered Agent	
Name William H. Benson	
Street Address (P.O. Box Number is Not Acceptable) 4780 Dairy Rd #103	
City Melbourne	FL Zip Code 32904


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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPST BENSON, WILLIAM H. 4031 U.S. HIGHWAY ONE NE PALM BAY, FL 32905 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4780 Dairy Rd Ste 103 Melbourne, FL 32904
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV BENSON, JOANNE 4031 U.S. HIGHWAY ONE NE PALM BAY, FL 32905 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4780 Dairy Rd Ste 103 Melbourne, FL 32904
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BENSON, WILLIAM H. SR. 4031 U.S. HIGHWAY ONE NE PALM BAY, FL 32905 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4780 Dairy Rd Ste 103 Melbourne, FL 32904
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 required 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, with all other like empowered.

SIGNATURE:  **William H. Benson** **4-18-07** **984 0889**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #