2008 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # N06000011692

POINTE OF VIEW TOWNHOUSE ASSOCIATION, INC.



Principal Place of Business 8804 E HWY 30 A SEA CREST, FL 32413

Suite, Apt. #, etc.

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2. Principal Place of Business - No P.O. Box #

the obligations of registered agent.

Mailing Address P.O.BOX 1207 DOTHAN, AL 36302

3. Mailing Address

Suite, Apt. #, etc.

FILED Mar 14, 2008 8:00 am **Secretary of State**

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3022008	Chg-NP	CR2E037 (12/06)
EEI Niverbo	·r	Applied For

City & State		City & State			4. FEI Number		Applied For	
					20-8807064		Not Applicable	
Zip	Country	Zip	Country		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent			
CINNIS, Ç. J	EFFREY			Name				
09 MAR WALT DR STE 1014 T WALTON BCH, FL 32547				Street Address (P.O. Box Number is Not Acceptable)				
	•							
				City		F	Zip Code	

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

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE TITLE Addition John Watson CAHBA, MARK Mark Dennis NAME (ADD) NAME 9088Westgate Pkwy. 2837 WOODHAMRD 308 Girard Ave. STREET ADDRESS STREET ADDRESS Dothan, AL 36303 DOTHAN, AL 36303 CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE Change X Addition Fred Saliba HORN, BOYD NAME NAME P.O. Drawer 6306 STREET ADDRESS 403 LIVE OAK TR STREET ADDRESS CITY-ST-7IP DOTHAN, AL 36301 CITY-ST-7IP Dothan, AL 36302 TITLE ☐ Delete TITLE Addition Change Alfred Saliba NORTHCUTT, GLEN NAME NAME 203 GIRARD AVE P.O. Drawer 6306 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DOTHAN, AL 36303 CITY-ST-ZIP Dothan, AL 36302 TITLE ☐ Delete TITLE ☐ Change Addition WEST, TOM Puli Reddy NAME NAME STREET ADDRESS 5 WESTWOOD RD #1 Foxchase STREET ADDRESS CITY-ST-ZIP DOTHAN, AL 36303 CITY-ST-ZIP Dothan, AL 36305 ☐ Delete TITLE TITLE ☐ Change Addition FOSS, ARNE MAME NAME Richmond McClintock STREET ADDRESS 102 ORMOND CT STREET ADDRESS 3402 Huntington PL CITY - ST - ZIP DOTHAN, AL 36305 CITY-ST-ZIP Dothan, AL 36303 TITLE ☐ Delete TITLE ☐ Change Addition Herb Gannon

12. I hereby certify that the information supplied with this filling 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.

NAME

STREET ADDRESS

CITY-ST-7IP

812 Parion Way

Enterprise, AL

SIGNATURE:

WOODHAM, FELTON

DOTHAN, AL 36305

108 N ENGLEWOOD DR

NAME

STREET ADDRESS

CITY-ST-ZIP

Elixs 1 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 334-794-672

36330