

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006677

FILED
Apr 19, 2009
Secretary of State

Entity Name: POINTE WEST H.O.A., INC.

Current Principal Place of Business:

12651 SEMINOLE BLVD., LOT 4-H
LARGO, FL 33778

New Principal Place of Business:

12651 SEMINOLE BLVD.
4-H
LARGO, FL 33778

Current Mailing Address:

12651 SEMINOLE BLVD., LOT 4-H
LARGO, FL 33778

New Mailing Address:

12651 SEMINOLE BLVD.
4-H
LARGO, FL 33778

FEI Number: 26-0479265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONATHAN JAMES DAMONTE, CHARTERED
12100 SEMINOLE BLVD.
SEMINOLE, FL 33778 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MITCHELL, ROBERT
Address: 12651 SEMINOLE BLVD. LOT 6-M
City-St-Zip: LARGO, FL 33778

Title: SD () Delete
Name: RYAN, LINDA
Address: 12651 SEMINOLE BLVD LOT 4-H
City-St-Zip: LARGO, FL 33778

Title: TD () Delete
Name: FRANZONI, JOAN
Address: 12651 SEMINOLE BLVD LOT 15-M
City-St-Zip: LARGO, FL 33778

Title: D () Delete
Name: MAHANNA, ANNA
Address: 12651 SEMINOLE BLVD. LOT 10-6
City-St-Zip: LARGO, FL 33778

Title: D (X) Delete
Name: WEAVER, RICH
Address: 12651 SEMINOLE BLVD. LOT 19
City-St-Zip: LARGO, FL 33778

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: D (X) Change () Addition
Name: CALL, ELIZABETH
Address: 12651 SEMINOLE BLVD. LOT 8-N
City-St-Zip: LARGO, FL 33778

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: ROBERT E. MITCHELL

PRES

04/19/2009

Electronic Signature of Signing Officer or Director

Date