

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000022

FILED
Mar 03, 2009
Secretary of State

Entity Name: ROSE POINTE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2806 W US HWY 90 STE 101
LAKE CITY, FL 32055

New Principal Place of Business:

2806 W US 90
SUITE 101
LAKE CITY, FL 32055

Current Mailing Address:

2806 W US HWY 90 STE 101
LAKE CITY, FL 32055

New Mailing Address:

PO BOX 3659
LAKE CITY, FL 32056

FEI Number: 26-2342626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAPPS, DANIEL
2806 W US HWY 90 STE 101
LAKE CITY, FL 32055 US

Name and Address of New Registered Agent:

CRAPPS, DANIEL
2806 W US 90
SUITE 101
LAKE CITY, FL 32055 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:

03/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CRAPPS, DANIEL
Address: 2806 W US HWY 90 STE 101
City-St-Zip: LAKE CITY, FL 32055

Title: DV () Delete
Name: FLETCHER, LYN
Address: 2806 W US HWY 90 STE 101
City-St-Zip: LAKE CITY, FL 32055

Title: DS () Delete
Name: MCCALL, KIM
Address: 2806 W US HWY 90 STE 101
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CRAPPS, DANIEL
Address: PO BOX 3659
City-St-Zip: LAKE CITY, FL 32056

Title: DV (X) Change () Addition
Name: FLETCHER, LYN
Address: PO BOX 3659
City-St-Zip: LAKE CITY, FL 32056

Title: DS (X) Change () Addition
Name: MCCALL, KIM
Address: PO BOX 3659
City-St-Zip: LAKE CITY, FL 32056

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: DANIEL CRAPPS

PRES

03/03/2009

Electronic Signature of Signing Officer or Director

Date