

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Feb 22, 2011
Secretary of State

DOCUMENT# N08000002355

Entity Name: SPINNAKER POINT HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**10 SPINNAKER POINT CT.
INDIAN HARBOUR BCH, FL 32937**New Principal Place of Business:****Current Mailing Address:**10 SPINNAKER POINT CT.
INDIAN HARBOUR BCH, FL 32937**New Mailing Address:****FEI Number:** 26-4709223**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PALMER, CHARLES E
10 SPINNAKER POINT CT.
INDIAN HARBOUR BCH, FL 32937 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: D
Name: KIRSCHNER, ANDREW
Address: 9 SPINNAKER POINT CT.
City-St-Zip: INDIAN HARBOUR BCH, FL 32937

Title: D
Name: MCKINNEY, MICHELLE
Address: 17 SPINNAKER POINT CT.
City-St-Zip: INDIAN HARBOR BCH, FL 32937

Title: D
Name: KNOWLTON, ANN H
Address: 13 SPINNAKER POINT CT.
City-St-Zip: INDIAN BCH, FL 32937

Title: D
Name: PALMER, CHARLES E
Address: 10 SPINNAKER POINT CT.
City-St-Zip: INDIAN BCH, FL 32937

I hereby 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 all other like empowered.

SIGNATURE: CHARLES E PALMER

D

02/22/2011

Electronic Signature of Signing Officer or Director

Date