2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2009
Secretary of State

DOCUMENT# N08408

Entity Name: NICHOLAS POINTE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

320 WEST BEARSS AVE.
TAMPA, FL 33613

New Principal Place of Business:

330 W. BEARSS AVE.
TAMPA, FL 33613

Current Mailing Address:

320 WEST BEARSS AVE.
TAMPA, FL 33613

New Mailing Address:

330 W. BEARSS AVE.
TAMPA, FL 33613

FEI Number: 59-2674568 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PULLARO, NICK
320 W. BEARSS AVE.
TAMPA, FL 33613 US

Name and Address of New Registered Agent:

HANKE, DOUGLAS P
330 W. BEARSS AVE.
TAMPA, FL 33613 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: DOUGLAS P. HANKE 03/10/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: NORMAN, BILL
Address: 324 W. BEARSS AVE
City-St-Zip: TAMPA, FL 33613

Title: DV ( ) Delete
Name: WEISS, MARK
Address: 322 W. BEARSS AVE
City-St-Zip: TAMPA, FL 33613

Title: DS ( ) Delete
Name: SUTTON, SUSAN
Address: 322 W. BEARSS AVE
City-St-Zip: TAMPA, FL 33613

Title: TD ( ) Delete
Name: HANKE, DOUGLAS
Address: 330 W BEARSS AVENUE
City-St-Zip: TAMPA, FL 33613

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: TD (X) Change ( ) Addition
Name: HANKE, DOUGLAS
Address: 330 W. BEARSS AVENUE
City-St-Zip: TAMPA, FL 33613

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: DOUGLAS P. HANKE T 03/10/2009
Electronic Signature of Signing Officer or Director Date