

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13947

FILED
Apr 08, 2010
Secretary of State

Entity Name: FLORENCE POINT OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5443 FLORENCE PT. DR.
FERNANDINA BEACH, FL 32034 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6162
FERNANDINA BEACH, FL 32034 US

New Mailing Address:

FEI Number: 59-2895055

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBIN, ST PETER G
5443 FLORENCE PT DRIVE
FERNANDINA BEACH, FL 32034 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: P
Name: HEALY, ROBERT
Address: 5438 MARSHVIEW LANE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D
Name: MCELWAIN, JUDY
Address: 5358 FLORENCE PT DR
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D
Name: HOWORT, PHIL
Address: 1328 HICKORY NUT CT.
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D
Name: JOHNSON, PETER
Address: 5425 FLORENCE PT DRIVE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D
Name: DREWRY, BUDDY
Address: 5483 FLORENCE PT. DR.
City-St-Zip: AMELIA ISLAND, FL 32034

Title: D
Name: WILLIAMS, ROBERT
Address: 5333 FLORENCE PT. DR.
City-St-Zip: FERNANDINA BEACH, FL 32034

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: ROBIN G. ST.PETER

RA

04/08/2010

Electronic Signature of Signing Officer or Director

Date