2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13947

FILED Mar 20, 2011 Secretary of State

Entity Name: FLORENCE POINT OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5443 FLORENCE PT. DR.

FERNANDINA BEACH, FL 32034 US

Current Mailing Address: New Mailing Address:

P.O. BOX 6162

US FERNANDINA BEACH, FL 32034

FEI Number: 59-2895055 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROBIN, ST PETER G 5443 FLORENCE PT DRIVE

FERNANDINA BEACH, FL 32034 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

HEALY, ROBERT Name: Address: 5438 MARSHVIEW LANE City-St-Zip: FERNANDINA BEACH, FL 32034

Title:

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

Title:

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

Title:

Name: PELLEGRINI, MARY 5367 FLORENCE PT. DR Address: FERNANDINA BEACH, FL 32034

City-St-Zip:

Title:

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

Title:

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

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 S/T 03/20/2011