## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17567

FILED Jan 07, 2010 Secretary of State

Entity Name: CENTRE POINTE ASSOCIATION, INC.

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

C/O J.M. SMITH 2831 N.W.41ST STREET ., STE. #G GAINESVILLE, FL 32606

Current Mailing Address: New Mailing Address:

C/O J.M. SMITH 2831 N.W. 41ST STREET, STE. #G GAINESVILLE, FL 32606

FEI Number: 59-2762484 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:

SMITH, J M 10424 SW 41ST PL GAINESVILLE, FL 32608 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:**

Title: F

Name: J.M. SMITH

Address: 2831 N.W. 41ST # G City-St-Zip: GAINESVILLE, FL 32606

 Title:
 STD

 Name:
 SMITH, TOBA

 Address:
 10424 SW 41ST PL

 City-St-Zip:
 GAINESVILLE, FL 32608

Title: VPDT

Name: DR GILDA JOSEPHSON Address: 2831 NW 41 STREET # F City-St-Zip: GAINESVILLE, FL 32606

Title: VPDS

 Name:
 BRETT TAMBLING

 Address:
 2831 N.W. 41ST # A

 City-St-Zip:
 GAINESVILLE, FL 32606

Title: VPDS

Name: ROBYN DENNY MACKAY Address: 2831 NW 41ST. #C City-St-Zip: GAINESVILLE, FL 32606

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: J.M. SMITH PRES 01/07/2010