

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 01, 2005  
Secretary of State**

DOCUMENT# N21889

Entity Name: CARLOUEL POINT CORPORATION

**Current Principal Place of Business:**

1176 MANDALAY PT  
CLEARWATER, FL 33767 US

**New Principal Place of Business:**

**Current Mailing Address:**

1176 MANDALAY PT  
CLEARWATER, FL 33767 US

**New Mailing Address:**

FEI Number: 65-0118475      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

YOUNG, DEAN  
1176 MANDALAY PT  
CLEARWATER, FL 33767 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: DP ( ) Delete  
Name: YOUNG, DEAN  
Address: 1176 MANDALAY AVE.  
City-St-Zip: CLEARWATER, FL

Title: DT ( ) Delete  
Name: H CLINE, ESQUIRE  
Address: 400 CLEVELAND ST  
City-St-Zip: CLEARWATER, FL

Title: DVP ( ) Delete  
Name: COPE, RICHARD  
Address: 1188 MANDALAY  
City-St-Zip: CLEARWATER, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: YOUNG, DEAN  
Address: 1176 MANDALAY AVE.  
City-St-Zip: CLEARWATER, FL 33767

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DVP (X) Change ( ) Addition  
Name: COPE, RICHARD  
Address: 1188 MANDALAY  
City-St-Zip: CLEARWATER, FL 33767

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD W COPE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DVP

02/01/2005

\_\_\_\_\_  
Date