2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23399

FILED May 01, 2007 Secretary of State

Entity Name: THE POINTE AT PONTE VEDRA CONDOMINIUM ASSOCIATION, INC.

Current P	Principal Place of Business:	New Principal Place of Business:
7645 GAT	I REALTY MANAGEMENT, INC. 'E PARKWAY SUITE 202 IVILLE, FL 32256 US	
Current N	/lailing Address:	New Mailing Address:
7645 GAT	I REALTY MANAGEMENT, INC. E PARKWAY SUITE 202 IVILLE, FL 32256 US	
In accordan	r: 59-2855788 FEI Number Applied For () nce with s. 607.193(2)(b), F.S., the corporation did did Address of Current Registered Agent:	FEI Number Not Applicable () Certificate of Status Desired (not receive the prior notice. Name and Address of New Registered Agent:
7645 GAT SUITE 202 JACKSON The above	NVILLE, FL 32256 US	e purpose of changing its registered office or registered agent, or
SIGNATUI	RE:	
	Electronic Signature of Registered A	gent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIREC
Title: Name: Address: City-St-Zip:	S (X) Delete WORTHAM, MARY ALICE 91 SAN JUAN SR C-1 PONTE VEDRA BCH, FL 32082	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	0 (X) Delete ROBINSON, JAY 91 SAN JUAN DRIVE E8 PONTE VEDRA BEACH, FL 32082	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	T (X) Delete PORTER, JANE 91 SAN JUAN DRICE, CC1 PONTE VEDRA BEACH, FL 32082	Title: () Change () Addition Name: Address: City-St-Zip:
Title:		Title: () Change () Addition
Name: Address: City-St-Zip:	P () Delete TRUVER, CURTIS 91 SAN JUAN DRIVE, # I3 PONTE VEDRA BCH, FL 32082	Name: Address: City-St-Zip:

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: MIKE KAZMIERSKI MGR 05/01/2007