

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25638

FILED
Mar 09, 2009
Secretary of State

Entity Name: POINTE BOCILLA PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

7025-A PLACIDA ROAD
ENGLEWOOD, FL 34224 US

New Principal Place of Business:

Current Mailing Address:

7025-A PLACIDA ROAD
ENGLEWOOD, FL 34224 US

New Mailing Address:

FEI Number: 65-0136553 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NODEN, R. CRAIG
7025-A PLACIDA ROD
ENGLEWOOD, FL 34224 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: PD () Delete
Name: GORDON, JAMES D
Address: 7025-A PLACIDA RD
City-St-Zip: ENGLEWOOD, FL 34224

Title: VD () Delete
Name: DYER, GREG
Address: 7025-A PLACIDA RD.
City-St-Zip: ENGLEWOOD, FL 34224

Title: SD () Delete
Name: PETERSON, CAROL
Address: 7025-A PALCIDA RD.
City-St-Zip: ENGLEWOOD, FL

Title: TD () Delete
Name: COHEN, DAVID
Address: 7025-A PALCIDA RD.
City-St-Zip: ENGLEWOOD, FL 34224

Title: D () Delete
Name: DEJULIO, BARBARA
Address: 7025-A PLACIDA RD
City-St-Zip: ENGLEWOOD, FL 34224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILKINS, GARY
Address: 7025-A PLACIDA RD
City-St-Zip: ENGLEWOOD, FL 34224

Title: VD (X) Change () Addition
Name: GORDON, KAREN D
Address: 7025-A PLACIDA RD.
City-St-Zip: ENGLEWOOD, FL 34224

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

Title: TD (X) Change () Addition
Name: COHEN, CANDACE
Address: 7025-A PALCIDA RD.
City-St-Zip: ENGLEWOOD, FL 34224

Title: () Change () Addition
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: KAREN D. GORDON

VD

03/09/2009

Electronic Signature of Signing Officer or Director

Date