

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 17, 2008 08:00 A
Secretary of State

DOCUMENT # N29256

1. Entity Name
PORPOISE POINT ASSOCIATION, INC.



Principal Place of Business
**2115 S PORPOISE PT
VERO BEACH, FL 32963 US**

Mailing Address
**2115 S PORPOISE PT
VERO BEACH, FL 32963 US**



04152008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2172403	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**PIERCE, WAYNE
2115 S PORPOISE PT
VERO BEACH, FL 32963**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

U00000304280
05/01/08-80006-015 61.25

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GRANATH, JOHN
STREET ADDRESS	2116 N PORPOISE PT
CITY-ST-ZIP	VERO BEACH, FL 32963

TITLE	D
NAME	HEDRIX, SONNY
STREET ADDRESS	2129 S PORPOISE PT
CITY-ST-ZIP	VERO BEACH, FL 32963

TITLE	D
NAME	GALASSO, RUSSELL
STREET ADDRESS	2096 S. PORPOISE PT
CITY-ST-ZIP	VERO BEACH, FL 32963

TITLE	D
NAME	JOHNSON, RUSSELL
STREET ADDRESS	2086 S. PORPOISE PT LN
CITY-ST-ZIP	VERO BEACH, FL 32963

TITLE	PD
NAME	PIERCE, WAYNE
STREET ADDRESS	2115 S. PORPOISE PT LN
CITY-ST-ZIP	VERO BEACH, FL 32963

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Wayne Pierce* **Wayne Pierce**

4-15-08 **4-15-08** *772 234-6109*
Date Daytime Phone #