

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31569

FILED  
Jan 26, 2009  
Secretary of State

**Entity Name:** THE POINTE CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1945 ABBEY ROAD, N-101  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

**Current Mailing Address:**

1945 ABBEY ROAD, N-101  
WEST PALM BEACH, FL 33415

**New Mailing Address:**

**FEI Number:** 65-0208542

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PETTY, LYNETTE  
1945 ABBEY ROAD, N-101  
WEST PALM BEACH, FL 33415 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: P ( ) Delete  
Name: ANGLISANO, MARC  
Address: 5184 PINE ABBEY DR SOUTH  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VP ( ) Delete  
Name: LOPEZ, JOSE  
Address: 1945 ABBEY RD N-201  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: TS ( ) Delete  
Name: PETTY, LYNETTE  
Address: 1945 ABBEY RD., N-101  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: T ( ) Delete  
Name: PETTY, LYNETTE  
Address: 1945 ABBEY RD., N-101  
City-St-Zip: WEST PALM BEACH, FL 33415

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

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

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

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

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: LYNETTE PETTY

P

01/26/2009

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

\_\_\_\_\_  
Date