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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

Corporation	MENT # N3 Name . POINTE HOMEOV		(O) CIATION, INC.							
Principal Place	of Business		iling Address							
# P.O. BOX 820696										
							orporated or Qualified 33/1989	3a. C	04/14/19	•
2. Principal Pla	ce of Rusiness	2a	Mailing Address			4. FEI Numt				Applied For
21	oc or Edamodd	26	William Ig 7 to 0 500			65-0)191361			lot Applicable
Suite, Apt. #	, etc.	—— <u>1</u>	Suite, Apt. #, etc.			5. Certificate	e of Status Desired			Additional
City P. Chata		27	City & State			C Floring	Osmonian Financian			Required
City & State		28	Oily & State				Campaign Financing ad Contribution			D May Be I to Fees
Zip	Country		Zip	Coun	try	8. This corp	oration has liability for	r intangible :	tax under s.	199.032,
24	25	29		30		Florida S		Yes [
	9. Name and Address	s of Current Regist	tered Agent	- l	31 Name	10. Name a	nd Address of New	Hegisterec	Agent	.
LITOM I	AUDENOE C					(D.O. b	is Alat Accorda	inle)		
LITOW, LAURENCE S			82 S:			Address (P.O. Box N	umber is Not Accepta	icie)		
SUITE 3100, ONE BISCAYNE TOWER 2 SOUTH BISCAYNE BLVD.		OWEN		Ţ	33					
MIAMI FL			84 City						85 Zip	o Code
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or register	o the provisions of Section ad agent, or both, in the S	tate of Florida. Such	i change was authori	zed by the co	e-named co orporation's	board of directors. I	hereby accept the ap	pointment a	as registered	agent. I am
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