

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35300

FILED
Apr 23, 2012
Secretary of State

Entity Name: EMERALD POINTE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

144 SHORE LINE DR
MARY ESTHER, FL 32569 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 706, N/A
MARY ESTHER, FL 325690706 US

New Mailing Address:

FEI Number: 59-3038925

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROSENQUEST, MARIANN D
157 SHORE LINE DR
MARY ESTHER, FL 32569 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
Name: HALL, SHARON
Address: 132 LONG POINTE DR
City-St-Zip: MARY ESTHER, FL 32569

Title: B
Name: HALL, GEORGE
Address: 132 LONG POINTE DR
City-St-Zip: MARY ESTHER, FL 32569

Title: D
Name: HOWELL, MIKE
Address: 161 LONG POINTE DR
City-St-Zip: MARY ESTHER, FL 32569

Title: TD
Name: ROSENQUEST, MARIANN D
Address: 157 SHORE LINE DR
City-St-Zip: MARY ESTHER, FL 32569

Title: S
Name: DEATON, MICHAEL
Address: 115 LONG POINTE DR
City-St-Zip: MARY ESTHER, FL 32569

Title: B
Name: JUNKINS, SETH
Address: 129 LONG POINTE DR
City-St-Zip: MARY ESTHER, FL 32569

I hereby 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 all other like empowered.

SIGNATURE: MARIANN D ROSENQUEST

TRES

04/23/2012

Electronic Signature of Signing Officer or Director

Date