

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37405

FILED
Mar 16, 2009
Secretary of State

Entity Name: HUNTINGTON POINTE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

2477 STICKNEY POINT RD
STE 118 A
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

2477 STICKNEY POINT RD
STE 118 A
SARASOTA, FL 34231 US

New Mailing Address:

FEI Number: 65-0333000 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ARGUS PROPERTY MANAGEMENT, INC.
2477 STICKNEY POINT ROAD
#118A
SARASOTA, FL 34231 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 (X) Delete
Name: CUNEO, KEN
Address: 8812 HAVENRIDGE DR.
City-St-Zip: SARASOTA, FL 34238

Title: S () Delete
Name: POWERS, CHRISTABEL
Address: 8831 HUNTINGTON POINTE DR.
City-St-Zip: SARASOTA, FL 34238

Title: VD () Delete
Name: BEITEL, RICHARD
Address: 8834 HUNTINGTON POINTE DR.
City-St-Zip: SARASOTA, FL 34238

Title: D () Delete
Name: EUGENE, OBRIEN
Address: 9019 ASHBOURNE CT.
City-St-Zip: SARASOTA, FL 34238

Title: T () Delete
Name: LINHORES, IKE
Address: 4239 HEARTHSTONE DR
City-St-Zip: SARASOTA, FL 34238

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: MILLS, HOWARD
Address: 8824 HAVENRIDGE DR.
City-St-Zip: SARASOTA, FL 34238

Title: VPD (X) Change () Addition
Name: SHINDLEBOWER, WOLFGANG
Address: 4221 HEARTHSTONE DR
City-St-Zip: SARASOTA, FL 34238

Title: PD (X) Change () Addition
Name: EUGENE, OBRIEN
Address: 9019 ASHBOURNE CT.
City-St-Zip: SARASOTA, FL 34238

Title: TD (X) Change () Addition
Name: LINHARES, IKE
Address: 4239 HEARTHSTONE DR
City-St-Zip: SARASOTA, FL 34238

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: EUGENE O'BRIEN

PD

03/16/2009

Electronic Signature of Signing Officer or Director

Date