

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38431

FILED
Apr 09, 2009
Secretary of State

Entity Name: THE POINTE AT PERICO BAY CLUB, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Mailing Address:

FEI Number: 65-0246090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 327795044 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: DT () Delete
Name: BAKER, RON
Address: 1377 PERICO POINT CIRCLE
City-St-Zip: BRADENTON, FL 34209

Title: SD () Delete
Name: YOUNG, AMY
Address: 1367 PERICO POINT CIRCLE
City-St-Zip: BRADENTON, FL 34209

Title: VPD () Delete
Name: BONAUTO, ALPHONSE
Address: 1353 PERICO POINT CIRCLE
City-St-Zip: BRADENTON, FL 34209

Title: PD () Delete
Name: SMITH, RICHARD
Address: 1365 PERICO POINTE CIRCLE
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: WEDDING, AUDREY
Address: 1383 PERICO POINTE CIR
City-St-Zip: BRADENTON, FL 34209

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: PD (X) Change () Addition
Name: JACOBS, JACK
Address: 1369 PERICO POINTE CIRCLE
City-St-Zip: BRADENTON, FL 34209

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: JACK JACOBS

PD

04/09/2009

Electronic Signature of Signing Officer or Director

Date