
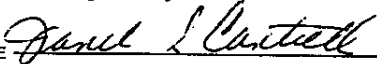



2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 08, 2004 8:00 am
Secretary of State

03-08-2004 90033 001 ****61.25

DOCUMENT # N43242			
1. Entity Name ISLAND POINTE HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business 120 S DILLARD STREET P O BOX 770218 (34777) WINTER GARDEN FL 34787		Mailing Address 120 S DILLARD STREET P O BOX 770218 (34777) WINTER GARDEN FL 34787	
2. Principal Place of Business 1130 CHASE DR Suite, Apt. #, etc.		3. Mailing Address P.O. BOX 770824 Suite, Apt. #, etc.	
City & State WINTER GARDEN, FL		City & State WINTER GARDEN, FL	
Zip 34787	Country ORANGE	Zip 34787	Country ORANGE
4. FEI Number 59-3110636		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DUPPENTHALER, DALLAS E 120 S. DILLARD STREET WINTER GARDEN FL 34787		7. Name and Address of New Registered Agent Name JANET CANTRELL Street Address (P.O. Box Number is Not Acceptable) 1130 CHASE DR City WINTER GARDEN FL Zip Code 34787	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  JANET CANTRELL DATE 02-16-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DUPPENTHALER D E 120 S DILLARD ST WINTER GARDEN FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARL P. MOORE 1040 CHASE DR WINTER GARDEN, FL. 34787 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TERRELL, JOHN 120 S DILLARD ST WINTER GARDEN FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SHIRLEY GUSTAFSON 1024 SADIE LN WINTER GARDEN, FL. 34787 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROPER, CHARLES 120 S. DILLARD STREET WINTER GARDEN FL 34787 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PAMELA KIRK 1030 CHASE DR WINTER GARDEN, FL 34787 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CANTRELL, JANET 1130 CHASE DRIVE WINTER GARDEN FL 34787 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD JANET CANTRELL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANN FLUHARTY 1023 SADIE LN WINTER GARDEN, FL 34787 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  JANET CANTRELL		DATE: 02-16-04 DAYTIME PHONE #: 407-654-9220	