

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47021

FILED
Jan 16, 2008
Secretary of State

Entity Name: POINTE TIBET HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 2362
WINTER MERE, FL 34786 US

New Principal Place of Business:

6057 LADY BET DR.
ORLANDO, FL 32819 US

Current Mailing Address:

PO BOX 2362
WINTER MERE, FL 34786 US

New Mailing Address:

FEI Number: 59-3156164 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEAD, TOM
6041 LADY BET DR
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

DECARLO, DENNIS
6057 LADY BET DR.
ORLANDO, FL 32819 US

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: DENNIS D DECARLO

01/16/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DE CARLO, DENNIS
Address: 6009 LADY BET DR
City-St-Zip: ORLANDO, FL 32819

Title: VP () Delete
Name: GISSY, TIM
Address: 6138 CHES CT.
City-St-Zip: ORLANDO, FL 32819

Title: T () Delete
Name: STEAD, TOM
Address: 6041 LADY BET DR
City-St-Zip: ORLANDO, FL 32819

Title: S () Delete
Name: STEAD, MARY ANN
Address: 6041 LADY BET DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: D () Delete
Name: ADDABO, JUDY
Address: 6102 CHES CT
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: DECARLO, DENNIS
Address: 6057 LADY BET DR.
City-St-Zip: ORLANDO, FL 32819

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

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: DENNIS D DECARLO

PRES

01/16/2008

Electronic Signature of Signing Officer or Director

Date