

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2008 8:00 am
Secretary of State

02-25-2008 90068 017 ****61.25

DOCUMENT # N50721 1. Entity Name EGRET POINTE ASSOCIATION, INC.					
Principal Place of Business C.A.S. MGMT 6041 BRIGHTWATER TERR BOYNTON BEACH, FL 33437 US			Mailing Address C.A.S. MGMT 12751 EL CLAIRE RANCH RD BOYNTON BEACH, FL 33437 US		
2. Principal Place of Business - No P.O. Box # CAMPBELL @ CORAL LAKES			3. Mailing Address SAME		
Suite, Apt. #, etc. 12751 EL CLAIRE RANCH RD			Suite, Apt. #, etc. SAME		
City & State BOYNTON BCH, FL			City & State BOYNTON BCH, FL		
Zip 33437		Country PAIM BCH		Zip 33437	
Country PAIM BCH		Country PAIM BCH		4. FEI Number 65-0388360	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent MASQUELIER, MELISSA C/O CAS@CORAL LAKES 12751 EL CLAIRE RANCH RD BOYNTON BEACH, FL 33437			7. Name and Address of New Registered Agent ELLEN GABLER 6113 BRIGHTWATER TERRACE BOYNTON BCH, FL 33437		
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  2/22/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		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	VPD2 STILES, JAMES 6100 BRIGHTWATER TERRACE BOYNTON BEACH, FL 33437	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P GABLER, ELLEN 6113 BRIGHTWATER TERR BOYNTON BEACH, FL 33437	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD MARGOLIS, JOE 6065 BRIGHTWATER TERR BOYNTON BEACH, FL 33437	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	SEC + 1ST VP JOE MARGOLIS 6065 BRIGHTWATER TERR. BOYNTON BEACH, FL 33437
TITLE NAME STREET ADDRESS CITY - ST - ZIP	3VP GORDON, IRV 6077 BRIGHTWATER TERR BOYNTON BEACH, FL 33437	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT SILVERSTEIN, JERRY 6083 BRIGHTWATER TERR BOYNTON BEACH, FL 33437	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input 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	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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:  2/22/08 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					