

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2005 8:00 am
Secretary of State

02-18-2005 90064 048 ****61.25

DOCUMENT # N93000001378

1. Entity Name

NORTH POINTE HOMEOWNERS ASSOCIATION OF LAKE WALES, INC.



Principal Place of Business

999 9TH STREET
LAKE WALES FL 33853
US

Mailing Address

P O BOX 27
LAKE WALES FL 33859-0027
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/04)

4. FEI Number

59-3179567

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GALLOWAY, ALBERT C JR., P.A.
924 DEVONSHIRE WAY
LAKE WALES FL 33853

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	RUMER, JUDY	
STREET ADDRESS	915 OXFORD WAY	
CITY-ST-ZIP	LAKE WALES FL 33853	
TITLE	S	<input type="checkbox"/> Delete
NAME	LAPCZYNSKI, CATHERINE	
STREET ADDRESS	814 CHELSEA WAY	
CITY-ST-ZIP	LAKE WALES FL 33853	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	PAETZOLD, SHARON	
STREET ADDRESS	915 OXFORD WAY	
CITY-ST-ZIP	LAKE WALES FL 33853	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PETTIT, BETTY	
STREET ADDRESS	906 CHELSEA WAY	
CITY-ST-ZIP	LAKE WALES FL 33853	
TITLE	D	<input type="checkbox"/> Delete
NAME	BOGUS, JAMES	
STREET ADDRESS	9077 CHELSEA WAY	
CITY-ST-ZIP	LAKE WALES FL 33853	
TITLE	D	<input type="checkbox"/> Delete
NAME	REHAU, JEAN T	
STREET ADDRESS	908 DEVONSHIRE WAY	
CITY-ST-ZIP	LAKE WALES FL 33853	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILLIAM GRIFFITH	
STREET ADDRESS	940 DEVONSHIRE WAY	
CITY-ST-ZIP	LAKE WALES, FL 33853	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAETZOLD CATHERINE LAPCZYNSKI	
STREET ADDRESS	814 CHELSEA WAY	
CITY-ST-ZIP	LAKE WALES FL 33853	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROZ DIGIOIA	
STREET ADDRESS	912 DEVONSHIRE WAY	
CITY-ST-ZIP	LAKE WALES, FL 33853	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PAT TURNER	
STREET ADDRESS	905 DEVONSHIRE WAY	
CITY-ST-ZIP	LAKE WALES, FL 33853	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JEAN T REHAU	
STREET ADDRESS	908 DEVONSHIRE WAY	
CITY-ST-ZIP	LAKE WALES, FL 33853	

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

Catherine Lapczynski, Treasurer 2/14/05

863-676-0850

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #