

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002977

FILED
Mar 26, 2009
Secretary of State

Entity Name: NASSAU POINTE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

500 NE SPANISH RIVER BLVD
STE 18
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

500 NE SPANISH RIVER BLVD
STE 18
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 65-0422361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEACON PROPERTY MANAGEMENT, INC.
500 NE SPANISH RIVER BLVD
SUITE 18
BOCA RATON, FL 33431 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: VD () Delete
Name: TINSLEY, BART
Address: 1170 NASSAU ST
City-St-Zip: DELRAY BCH, FL 33483

Title: PD () Delete
Name: MARRA, JAMIE
Address: 1190 NASSAU ST
City-St-Zip: DELRAY BCH, FL 33483

Title: SD () Delete
Name: GREENE, MARTYN
Address: 1160 NASSAU ST
City-St-Zip: DELRAY BCH, FL 33483

Title: TD () Delete
Name: GALLIVAN, SCOTT
Address: 1180 NASSAU ST
City-St-Zip: DELRAY BCH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TINSLEY, BART
Address: 1170 NASSAU ST
City-St-Zip: DELRAY BCH, FL 33483

Title: D (X) Change () Addition
Name: MARRA, JAMIE
Address: 1190 NASSAU ST
City-St-Zip: DELRAY BCH, FL 33483

Title: D (X) Change () Addition
Name: GREENE, MARTYN
Address: 1160 NASSAU ST
City-St-Zip: DELRAY BCH, FL 33483

Title: D (X) Change () Addition
Name: GALLIVAN, SCOTT
Address: 1180 NASSAU ST
City-St-Zip: DELRAY BCH, FL 33483

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: MARTYN GREENE

D

03/26/2009

Electronic Signature of Signing Officer or Director

Date