

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2006 8:00 am
Secretary of State

05-11-2006 90246 036 ****61.25

DOCUMENT # N94000000938					
1. Entity Name LOXAHATCHEE POINTE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 400 TONEY PENNA DR JUPITER, FL 33458 US			Mailing Address 400 TONEY PENNA DR JUPITER, FL 33458 US		
2. Principal Place of Business <i>Prime Management Group</i>		3. Mailing Address <i>Prime Management Group</i>			
Suite, Apt. #, etc. <i>Same</i>		Suite, Apt. #, etc. <i>Same</i>		03212006 Chg-NP CR2E037 (11/05)	
City & State		City & State		4. FEI Number 59-0323467	
Zip		Country		Applied For Not Applicable	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VAUGHN, DAVID C/O DICKINSON MGMT 400 TONEY PENNA DR JUPITER, FL 33458			7. Name and Address of New Registered Agent Name <i>Sachs, Sax & Klein</i> Street Address (P.O. Box Number is Not Acceptable) <i>301 Yamato Rd.</i> City <i>Boca Raton</i> FL Zip Code <i>33431</i>		
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 <i>[Signature]</i> Signature, typed or printed name of registered agent and title if applicable			DATE <i>4/28/06</i> (NOTE: Registered Agent signature required when reinstating)		
Filing Fee is \$61.25 Due by May 1, 2006			9. Election Campaign Financing ☐ \$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	P SPARKS, CHARLES 6481 SPARTINA CIRCLE JUPITER, FL 33548	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Dunlap, Ron</i> <i>19985 Loxahatchee Pointe Dr.</i> <i>Jupiter, FL 33458</i>	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BONAVITA, AUGUST 6500 SPARTINA CIRCLE JUPITER, FL 33458	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Kleisley, Richard</i> <i>19794 Loxahatchee Pointe Dr.</i> <i>Jupiter, FL 33458</i>	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SCHATTNER, NORMA 19874 LOXAHATCHEE POINTE DR JUPITER, FL 33458	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Schattner, Norma</i> <i>19874 Loxahatchee Pointe Dr.</i> <i>Jupiter, FL 33458</i>	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DUNLAP, VICKI 19985 LOXAHATCHEE POINTE DR JUPITER, FL 33458	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Rehnberg, Patricia</i> <i>19954 Loxahatchee Pointe Dr.</i> <i>Jupiter, FL 33458</i>	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHIRMER, CHRIS 19954 LOXAHATCHEE POINTE DR JUPITER, FL 33458	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 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 <i>[Signature]</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE <i>4/25/06</i> Daytime Phone #		