2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2010
Secretary of State

DOCUMENT# N94000001831

Entity Name: VILLAS AT LAKEPOINTE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

13548 LAKEPOINTE DR S
CLEARWATER, FL 337622289 US

New Principal Place of Business:

Current Mailing Address:

13548 LAKEPOINTE DR S
CLEARWATER, FL 337622289 US

New Mailing Address:

FEI Number: 59-3240649 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STRITE, GENE
13554 LAKEPOINTE DRIVE S.
CLEARWATER, FL 33762 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: DP
Name: STRITE, GENE
Address: 13554 LAKEPOINTE DRIVE S.
City-St-Zip: CLEARWATER, FL 33762

Title: D
Name: BISHOP, DOUGLAS
Address: 13614 LAKEPOINTE DRIVE S.
City-St-Zip: CLEARWATER, FL 33762

Title: D
Name: SMITH, DAVE
Address: 13592 LAKEPOINTE DRIVE S.
City-St-Zip: CLEARWATER, FL 33762

Title: S
Name: STRITE, NANCY
Address: 13554 LAKEPOINTE DRIVE S.
City-St-Zip: CLEARWATER, FL 33762

Title: T
Name: STELBASKY, JIM
Address: 13590 LAKEPOINTE DRIVE S.
City-St-Zip: CLEARWATER, FL 33762

I hereby 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 all other like empowered.

SIGNATURE: JIM STELBASKY T 02/23/2010

Electronic Signature of Signing Officer or Director — Date