

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005801

FILED  
Apr 02, 2008  
Secretary of State

**Entity Name:** THE SOUTHPOINTE AT BAYSHORE SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2811 SOUTHPOINTE LANE  
TAMPA, FL 33611

**New Principal Place of Business:**

**Current Mailing Address:**

2811 SOUTHPOINTE LANE  
TAMPA, FL 33611

**New Mailing Address:**

**FEI Number:** 59-3295789

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARTMANN, RICHARD  
2811 SOUTHPOINTE LANE  
TAMPA, FL 33611 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: T ( ) Delete  
Name: JEAKLE, DEB  
Address: 2812 SOUTHPOINTE LANE  
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete  
Name: PARKS, MATT  
Address: 2803 SOUTHPOINTE LANE  
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete  
Name: WACHTEL, SUE  
Address: 2808 SOUTHPOINTE LANE  
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete  
Name: JEAKLE, DAVID  
Address: 2812 SOUTHPOINTE LN  
City-St-Zip: TAMPA, FL 33611

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DEB JEAKLE

T

04/02/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date