


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90399 037 ****61.25

DOCUMENT # N95000000734					
1. Entity Name HOMEOWNERS' ASSOCIATION OF EAGLE POINT, INC.					
Principal Place of Business 7603 EAGLE POINT DR DELRAY BEACH, FL 33446 US		Mailing Address 500 N.E. SPANISH RIVER BLVD SUITE #18 BOCA RATON, FL 33431 US			
2. Principal Place of Business - No P.O. Box # 500 NE Spanish River Blvd		3. Mailing Address			
Suite, Apt. #, etc. Ste.		Suite, Apt. #, etc.			
City & State Boca Raton FL		City & State			
Zip 33431	Country US	Zip	Country		
6. Name and Address of Current Registered Agent WILLIS, ERNEST W 500 NE SPANISH RIVER BLVD BOCA RATON, FL 33431		7. Name and Address of New Registered Agent			
Name		Name			
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)			
City		City	Zip Code		
FL					
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PD FLEMING, CHARLES 7616 EAGLE POINT DRIVE DELRAY BEACH, FL 33446	<input type="checkbox"/> Delete	TITLE	VPO Sal Ambrico 7399 Eagle Point Drive Delray Beach, FL 33446	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D KOCH, RONALD 7620 EAGLE POINT DRIVE DELRAY BEACH, FL 33446	<input type="checkbox"/> Delete	TITLE	PDD Alice Golub 7603 Eagle Point Dr. Delray Beach, FL 33446	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	VTD COOLUB, ALICE 7603 EAGLE POINT DRIVE DELRAY BEACH, FL 33446	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D AMBRICO, SALVATORE 7599 EAGLE POINT DRIVE DELRAY BCH, FL 33446	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	SD HERRING, HILL 7575 EAGLE POINT DR., #53 DELRAY BCH, FL 33446	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D ALUISI, LUIZ 7608 EAGLE DELRAY BEACH, FL 33446	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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>Alice Coolub</i>		Date: <i>4/27/07</i>		Daytime Phone # _____	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	

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4. FEI Number 65-0646131 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required