2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2009
Secretary of State

DOCUMENT# N95000001987

Entity Name: DEAN POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1750 W. BROADWAY STREET
SUITE 220
OVIEDO, FL 32765 US

New Principal Place of Business:

Current Mailing Address:

1750 W. BROADWAY STREET
SUITE 220
OVIEDO, FL 32765 US

New Mailing Address:

FEI Number: 59-3342509 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, KEVIN
1750 W. BROADWAY STREET
SUITE 220
OVIEDO, FL 32765 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: P ( ) Delete
Name: SANTIAGO, MIRTA
Address: 10136 DEAN POINT PLACE
City-St-Zip: ORLANDO, FL 32825

Title: VP ( ) Delete
Name: GRIFFIN, LORENE
Address: 10132 DEAN POINT PL
City-St-Zip: ORLANDO, FL 32825

Title: T ( ) Delete
Name: COLLETTE, ROBERT
Address: 10203 DEAN POINT PL
City-St-Zip: ORLANDO, FL 32825

Title: S ( ) Delete
Name: ARAUJO, ROLANDO
Address: 10137 DEAN POINT PL
City-St-Zip: ORLANDO, FL 32825

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: D (X) Change ( ) Addition
Name: HALE, MARY
Address: 10204 DEAN POINT PLACE
City-St-Zip: ORLANDO, FL 32825

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: MIRTA SANTIAGO P 01/20/2009

Electronic Signature of Signing Officer or Director — Date