2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# N95000003467

Entity Name: POINSETTIA HOMEOWNERS ASSOCIATION OF BREVARD, INC.

Current Principal Place of Business:

846 POINSETTA DRIVE
INDIAN HARBOR BEACH, FL 32937 US

New Principal Place of Business:

Current Mailing Address:

846 POINSETTA DRIVE
INDIAN HARBOUR BEACH, FL 32937 US

New Mailing Address:

FEI Number: 59-3377857 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HENRY, DENISE A
835 POINSETTA DR
INDIAN HARBOUR BEACH, FL 32937 US

Name and Address of New Registered Agent:

PELLIGRA, CONNIE
833 POINSETTA DR
INDIAN HARBOUR BEACH, FL 32937 US

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: CONNIE PELLIGRA 03/27/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: TS ( ) Delete
Name: HENRY, DENISE A
Address: 835 POINSETTA DR.
City-St-Zip: INDIAN HARBOUR BCH, FL 32937

Title: P ( ) Delete
Name: COTTAM, VINCENT
Address: 829 POINSETTA DR
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

Title: VP ( ) Delete
Name: PICARDI, AL
Address: 832 POINSETTA DR
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change ( ) Addition
Name: PELLIGRA, CONNIE
Address: 833 POINSETTA DR.
City-St-Zip: INDIAN HARBOUR BCH, FL 32937

Title: P (X) Change ( ) Addition
Name: PICARDI, ALBERT
Address: 832 POINSETTA DR
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

Title: VP (X) Change ( ) Addition
Name: SPILLARE, SHELBY
Address: 830 POINSETTA DR
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

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: CONNIE PELLIGRA ST 03/27/2009
Electronic Signature of Signing Officer or Director Date