

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005013

FILED
Apr 14, 2009
Secretary of State

Entity Name: MARSH POINTE HOMEOWNERS ASSOCIATION OF LEE COUNTY, INC.

Current Principal Place of Business:

76 PONDELLA RD.
SUITE 201
NO. FT. MYERS, FL 33903 US

New Principal Place of Business:

Current Mailing Address:

76 PONDELLA RD.
SUITE 201
NO. FT. MYERS, FL 33903 US

New Mailing Address:

FEI Number: 65-1108591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAPOSTA, RICHARD L
GULFSHORES CAM INC.
76 PONOELLA RD 201
NORTH FORT MYERS, FL 33903 US

Name and Address of New Registered Agent:

LAPOSTA, RICHARD L
GULFSHORES CAM INC.
76 PONDELLA RD 201
NORTH FORT MYERS, FL 33903 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:

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DEMANT, JOHN
Address: 6072 EAGLE WATCH COURT
City-St-Zip: N. FORT MYERS, FL 33917 US

Title: DS () Delete
Name: FROSCENO, LOIS
Address: 6088 EAGLE WATCH CT
City-St-Zip: NO FT MYERS, FL 33917

Title: D () Delete
Name: PAYAM, MOREY
Address: 6097 EAGLE WATCH COURT
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: DVP () Delete
Name: LAPLANTE, WILLIAM
Address: 15301 SAM SNEAD LANE
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: D () Delete
Name: DEVANEY, DONALD
Address: 6064 EAGLE WATCH COURT
City-St-Zip: NORTH FORT MYERS, FL 33917

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:

Title: D (X) Change () Addition
Name: COLLERAN, WILLIAM
Address: 6044 EAGLE WATCH COURT
City-St-Zip: NORTH FORT MYERS, FL 33917

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: JOHN DEMANT

P

04/14/2009

Electronic Signature of Signing Officer or Director

Date