

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 16, 2008 8:00 am**  
**Secretary of State**

04-16-2008 90015 045 \*\*\*\*61.25

**DOCUMENT # N95000005334**

1. Entity Name

STILL POINT HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

6670 STILL POINT DRIVE  
MELBOURNE FL 32940  
US

Mailing Address

FRANCIS M. STEWART, CPA  
6939 N. WICKHAM RD  
MELBOURNE FL 32940  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-3353436

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STEWART, FRANCIS M  
6939 N WICKHAM RD  
MELBOURNE FL 32940

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to:**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME WOODS, PETE  
STREET ADDRESS 6670 STILL POINT DR.  
CITY- ST- ZIP MELBOURNE FL 32940

TITLE ☐ Delete  
NAME CATAMBAY, WILLIAM  
STREET ADDRESS 6770 STILLPOINT DR  
CITY- ST- ZIP MELBOURNE FL 32940

TITLE ☒ Delete  
NAME JOHNSON, SHANNON  
STREET ADDRESS 6750 STILL POINT DR  
CITY- ST- ZIP MELBOURNE FL 32940

TITLE ☐ Delete  
NAME ELMAGHRABY, JANINE  
STREET ADDRESS 6630 STILL POINT DR  
CITY- ST- ZIP MELBOURNE FL 32940

TITLE ☒ Delete  
NAME AINBINDER, MICHAEL  
STREET ADDRESS 6760 STILL POINT DR  
CITY- ST- ZIP MELBOURNE FL 32940

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☒ Addition  
NAME *V Barlow, Sandy*  
STREET ADDRESS *6720 Still Point Dr.*  
CITY- ST- ZIP *Melbourne, FL 32940*

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☒ Addition  
NAME *D Kappert, Chuck*  
STREET ADDRESS *6640 Still Point Dr.*  
CITY- ST- ZIP *Melbourne, FL 32940*

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*3/13/08*

*321-752-2070*