

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005334

FILED
Mar 18, 2009
Secretary of State

Entity Name: STILL POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6670 STILL POINT DRIVE
MELBOURNE, FL 32940 US

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 59-3353436 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, FRANCIS M
6939 N WICKHAM RD
MELBOURNE, FL 32940 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: D () Delete
Name: WOODS, PETE
Address: 6670 STILL POINT DR.
City-St-Zip: MELBOURNE, FL 32940

Title: P () Delete
Name: CATAMBAY, WILLIAM
Address: 6770 STILLPOINT DR
City-St-Zip: MELBOURNE, FL 32940

Title: V () Delete
Name: BARLOW, SANDY
Address: 6720 STILL POINT DR.
City-St-Zip: MELBOURNE, FL 32940

Title: S () Delete
Name: ELMAGHRABY, JANINE
Address: 6630 STILL POINT DR
City-St-Zip: MELBOURNE, FL 32940

Title: D () Delete
Name: KAPPERT, CHUCK
Address: 6640 STILL POINT DR.
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: EUBANK, PATRICIA
Address: 6760 STILLPOINT DR
City-St-Zip: MELBOURNE, FL 32940

Title: VPD (X) Change () Addition
Name: JOHNSON, SHANNON
Address: 6750 STILL POINT DR.
City-St-Zip: MELBOURNE, FL 32940

Title: D (X) Change () Addition
Name: ELMAGHRABY, JANINE
Address: 6630 STILL POINT DR
City-St-Zip: MELBOURNE, FL 32940

Title: SD (X) Change () Addition
Name: KAPPERT, CHUCK
Address: 6640 STILL POINT DR.
City-St-Zip: MELBOURNE, FL 32940

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: PATRICIA EUBANK

PD

03/18/2009

Electronic Signature of Signing Officer or Director

_____ Date