

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002461

FILED
Mar 24, 2009
Secretary of State

Entity Name: OAK POINTE OF TIGER POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4176 OAK POINTE DR.
GULF BREEZE, FL 32563 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6083
GULF BREEZE, FL 32563

New Mailing Address:

FEI Number: 59-3397142 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOEFLICH, WENDY
4176 OAK POINTE DR.
GULF BREEZE, FL 32563 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: JENSEN, KEN
Address: 4055 OAK POINTE DR.
City-St-Zip: GULF BREEZE, FL 32563

Title: V () Delete
Name: GERLITS, LARRY
Address: 407 OAK POINTE DR.
City-St-Zip: GULF BREEZE, FL 32563

Title: S () Delete
Name: BROGDON, JILL
Address: 4070 OAK POINTE DR.
City-St-Zip: GULF BREEZE, FL 32563

Title: T () Delete
Name: DEFlich, WENDY P
Address: 1176 OAK POINTE DR.
City-St-Zip: GULF BREEZE, FL 32563

Title: LAND () Delete
Name: MCESCHERN, JIM
Address: 4115 OAK POINTE DRIVE
City-St-Zip: GULF BREEZE, FL 32563

Title: ARC () Delete
Name: CARLSON, LINDA
Address: 4067 OAK POINTE DRIVE
City-St-Zip: GULF BREEZE, FL 32563

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: T (X) Change () Addition
Name: HOEFLICH, WENDY C
Address: 4176 OAK POINTE DR.
City-St-Zip: GULF BREEZE, FL 32563

Title: ARCH (X) Change () Addition
Name: LEAYCRAFT, JACK
Address: 4115 OAK POINTE DRIVE
City-St-Zip: GULF BREEZE, FL 32563

Title: LAND (X) Change () Addition
Name: CARLSON, LINDA
Address: 4067 OAK POINTE DRIVE
City-St-Zip: GULF BREEZE, FL 32563

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: WENDY HOEFLICH

T

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date