

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002461

FILED
Apr 30, 2012
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
Name: SEAGER, CLYDE
Address: 4135 OAK POINTE DR.
City-St-Zip: GULF BREEZE, FL 32563

Title: ARCH
Name: MILLER, ROBERT
Address: 4110 OAK POINTE DR.
City-St-Zip: GULF BREEZE, FL 32563

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

Title: T
Name: HOEFLICH, WENDY C
Address: 4176 OAK POINTE DR.
City-St-Zip: GULF BREEZE, FL 32563

Title: S
Name: MARPLE, KENT
Address: 4155 OAK POINTE DRIVE
City-St-Zip: GULF BREEZE, FL 32563

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

I hereby 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 all other like empowered.

SIGNATURE: WENDY C HOEFLICH

T

04/30/2012

Electronic Signature of Signing Officer or Director

Date