

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003556

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** EAGLE POINT COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

5522 N NW 43RD STREET  
SUITE B  
GAINESVILLE, FL 32653 US

**New Principal Place of Business:**

**Current Mailing Address:**

5522 N NW 43RD STREET  
SUITE B  
GAINESVILLE, FL 32653 US

**New Mailing Address:**

**FEI Number:** 59-3425410

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MORALES, CAROL  
C/O BOSSHARDT PROPERTY MGT  
5522 NW 43RD STREET SUITE B  
GAINESVILLE, FL 32653 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: SD ( ) Delete  
Name: BRACKINS, TORRI  
Address: 1004 NW 90 DRIVE  
City-St-Zip: GAINESVILLE, FL 32606

Title: TD ( ) Delete  
Name: ANDREE, FRED  
Address: 9027 NW 16 LANE  
City-St-Zip: GAINESVILLE, FL 32606

Title: VPD ( ) Delete  
Name: MCGINNIS, DOROTHY  
Address: 1313 NW 89 TERRACE  
City-St-Zip: GAINESVILLE, FL 32606

Title: D ( ) Delete  
Name: COLBY, OLSON  
Address: 1036 NW 86 TERRACE  
City-St-Zip: GAINESVILLE, FL 32606 US

Title: PD ( ) Delete  
Name: WAGNER, BRANDON  
Address: 1524 NW 89 AVE.  
City-St-Zip: GAINESVILLE, FL 32606 US

**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: D (X) Change ( ) Addition  
Name: ALMOND, RICHARD  
Address: 1019 NW 90 DRIVE  
City-St-Zip: GAINESVILLE, FL 32606 US

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

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: BRANDON WAGNER

PRES

04/27/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date