2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2001 8:00 am
Secretary of State
05-02-2001 90131 047 ****61.25

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DOCUMENT # N97000003138

1. Entity Name

VIEW POINTE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2811-E INDUSTRIAL PLAZA TALLAHASSEE FL 32301	2811-E INDUSTRIAL PLAZA TALLAHASSEE FL 32301

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number ~~59-3287571~~ 59-3305307 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GHAZVINI-NEHAD, MEHRDAD
2811-E INDUSTRIAL PLAZA
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name Tracy Smith c/o Community Property Mgmt.
Street Address (P.O. Box Number is Not Acceptable) 1815 Miccosukee Commons Dr. Suite 104
City Tallahassee FL Zip Code 32308

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.

SIGNATURE _____ Tracy Smith DATE 4-27-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GHAZVINI-NEJAD, HOSSEIN 4727 N. MONROE STREET TALLAHASSEE FL 32303	☐ Delete	PD Greg Nelson 3070 Layla St. Tallahassee Fl 32303	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD GHAZVINI-NEJAD, BEHZAD 4727 N. MONROE STREET TALLAHASSEE FL 32303	☐ Delete	STD Elizabeth Endsley 3052 Layla St. Tallahassee Fl 32303	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD GHAZVINI-NEJAD, MEHRAN 4727 N. MONROE STREET TALLAHASSEE FL 32303	☐ Delete	VPD Stephen Leach 3243 SKYVIEW DR. Tallahassee Fl 32303	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD GHAZVINI-NEJAD, MEHRDAD 4727 N. MONROE STREET TALLAHASSEE FL 32303	☐ Delete	D William Gilmore 3235 SKYVIEW Dr. Tallahassee Fl 32303	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	D Christina Bischoff 3226 SKYVIEW DR. Tallahassee Fl 32303	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	D Tracy Williams 3181 Layla St Tallahassee Fl. 32303	☐ Change ☐ Addition

CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 any address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Greg Nelson 4/27/01 309-7368
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #