2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003138

FILED Apr 19, 2010 Secretary of State

Entity Name: VIEW POINTE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2935 WHIRLAWAY TRAIL TALLAHASSEE, FL 32309

Current Mailing Address: New Mailing Address:

2910 KERRY FOREST PKY DR, BOX 303 TALLAHASSEE, FL 32309

FEI Number: 59-3305307 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ROJAS, KELLY
2935 WHIRLAWAY TRAIL
TALLAHASSEE, FL 32309 US

ROJAS, COLLEEN
2935 WHIRLAWAY TRAIL
TALLAHASSEE, FL 32309 US

TALLAHASSEE, FL 32309 US

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: COLLEEN ROJAS 04/19/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

 Name:
 JONES, VALERIE

 Address:
 3274 SKYVIEW DRIVE

 City-St-Zip:
 TALLAHASSEE, FL 32303

Title: D

Name: LILLY, JOANNA Address: 3039 LAYLA ST

City-St-Zip: TALLAHASSEE, FL 32303

Title: STD

 Name:
 COURSON, CHARLES

 Address:
 3082 LAYLA STREET

 City-St-Zip:
 TALLAHASSEE, FL 32303

Title:

 Name:
 EASON, HELEN

 Address:
 3255 SKYVIEW DRIVE

 City-St-Zip:
 TALLAHASSEE, FL 32303

Title: DVP

Name: GILBERT, MELANIE

Address: 4778 PLANTERS RIDGE DRIVE City-St-Zip: TALLAHASSEE, FL 32311

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: VALERIE JONES PD 04/19/2010