

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002450

FILED
Apr 27, 2009
Secretary of State

Entity Name: POINCIANA PLACE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

320 SCENIC GULF DRIVE
UNIT #112
MIRAMAR BEACH, FL 32550

New Principal Place of Business:

4400 HIGHWAY 20 E
SUITE 312
NICEVILLE, FL 32578 US

Current Mailing Address:

320 SCENIC GULF DRIVE
UNIT #112
MIRAMAR BEACH, FL 32550

New Mailing Address:

P.O. BOX 5263
NICEVILLE, FL 32578 US

FEI Number: 59-3596505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTHEWS, CHARLES B DST
320 SCENIC GULF DRIVE
112
MIRAMAR BEACH, FL 32550 US

Name and Address of New Registered Agent:

LANDSBERGER, DARLANE
4400 HIGHWAY 20 E
SUITE 312
NICEVILLE, FL 32578 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: DARLANE LANDSBERGER

04/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WEBB, SARAH
Address: 1251 HOLBROOK LANE
City-St-Zip: STARKVILLE, MS 39759

Title: DVP () Delete
Name: KONTOS, EVIE
Address: 226 DIAMOND COVE
City-St-Zip: DESTIN, FL 32541

Title: DTS () Delete
Name: MATTHEWS, C. BRANTLEY
Address: 320 SCENIC GULF DRIVE
City-St-Zip: MIRAMAR BEACH, FL 32550

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PHELAN, CATHERINE
Address: 137 RUE CARIBE
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: VD (X) Change () Addition
Name: ADLER, DARLENE
Address: 112 SEASCAPE BLVD UNIT #303
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: STD (X) Change () Addition
Name: CALLAHAN, RON
Address: 6440 JET PILOT TRAIL
City-St-Zip: TALLAHASSEE, FL 32398 US

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: CATHERINE PHELAN

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date