


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2008 08:00 AM
Secretary of State

DOCUMENT # N98000006215	
1. Entity Name GREEN POINT CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 1899 PORTER LAKE DR #107 SARASOTA, FL 34240	Mailing Address 1899 PORTER LAKE DR #107 SARASOTA, FL 34240
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05072008 No Chg-NP CR2E037 (4/06)

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4. FEI Number 65-0915444	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HILLIER, LAURA L ESQ. 1899 PORTER LAKE DR #106 SARASOTA, FL 34240

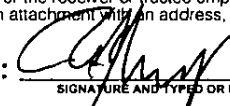
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE: 	Terrence J. Murphy	4/25/08
<small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>		<small>DATE</small>

Filing Fee is \$61.25 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000950880 06/04/08-80010-004 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HILLIER, LAURA L 1899 PORTER LAKE DRIVE #106 SARASOTA, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MURPHY, TERRENCE J 1899 PORTER LAKE DRIVE #104 SARASOTA, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MURPHY, TERRENCE J 1899 PORTER LAKE DR #104 SARASOTA, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BASSETT, MARK E 1899 PORTER LAKE DR #105 SARASOTA, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 an address, with all other like empowered.		
SIGNATURE: 	Terrence J. Murphy	4/25/08
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>
		<small>Daytime Phone #</small>