2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003343

FILED Jan 04, 2008 Secretary of State

Entity Name: DUNE POINTE OWNERS' ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 670 SANTA ROSA BLVD FT WALTON BEACH, FL 32548 **Current Mailing Address: New Mailing Address:** 43 MIRACLE STRIP PKWY FT WALTON BEACH, FL 32548 FEI Number: 59-3635185 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: BROOKS AND SHOREY RESORTS, INC. 43 MIRACLE STRIP PKWY SW FT WALTON BEACH, FL 32548 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BROCKMAN, SONNY Name: Name: Address: 9428 TRILLIUM Address: City-St-Zip: ST LOUIS, MO 63126 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MARSH, MARCIA Name: Address: 1664 CARLSON LANE Address: City-St-Zip: MARIETTA, GA 30064 City-St-Zip: Title: () Delete Title: () Change () Addition TURNER, EDDIE Name: Name: 5812 RIVERSTONE CIRCLE Address: Address: City-St-Zip: ATLANTA, GA 30339 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: SONNY BROCKMAN P 01/04/2008