

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003378

FILED
Apr 27, 2007
Secretary of State

Entity Name: HIGH POINTE ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

9072 COUNTRY MILL LANE
JACKSONVILLE, FL 32222

New Principal Place of Business:

Current Mailing Address:

9072 COUNTRY MILL LANE
JACKSONVILLE, FL 32222

New Mailing Address:

FEI Number: 59-3715803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHEELER, TOMMY
9072 COUNTRY MILL LANE
JACKSONVILLE, FL 32222 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: STENSON, EDWARD
Address: 9135 COUNTRY MILL LANE
City-St-Zip: JACKSONVILLE, FL 32222

Title: VP () Delete
Name: WILMOTH, BOB
Address: 9127 COUNTRY MILL LANE
City-St-Zip: JACKSONVILLE, FL 32222

Title: S () Delete
Name: WILLIS, ANN
Address: 9055 COUNTRY MILL LANE
City-St-Zip: JACKSONVILLE, FL 32222

Title: T () Delete
Name: WHEELER, TOMMY
Address: 9072 COUNTRY MILL LANE
City-St-Zip: JACKSONVILLE, FL 32222

Title: D () Delete
Name: CHELETTE, BARBARA
Address: 9056 COUNTRY MILL LANE
City-St-Zip: JACKSONVILLE, FL 32222

Title: D () Delete
Name: TAMARES, JAMIE
Address: 9041 COUNTRY MILL LANE
City-St-Zip: JACKSONVILLE, FL 32222

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: CHELETTE, LUTHER
Address: 9056 COUNTRY MILL LANE
City-St-Zip: JACKSONVILLE, FL 32222

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WILMOTH, BOB
Address: 9127 COUNTRY MILL LANE
City-St-Zip: JACKSONVILLE, FL 32222

Title: D (X) Change () Addition
Name: COONER, JAMES
Address: 9103 COUNTRY MILL LANE
City-St-Zip: JACKSONVILLE, FL 32222

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: TOMMY WHEELER

T

04/27/2007

Electronic Signature of Signing Officer or Director

Date