2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2008
Secretary of State

DOCUMENT# N99000005592

Entity Name: FISHERMAN'S POINTE ASSOCIATION, INC.

Current Principal Place of Business:

9711 OVERSEAS HWY
MARATHON, FL 33050

New Principal Place of Business:

Current Mailing Address:

P O BOX 500309
MARATHON, FL 33050

New Mailing Address:

FEI Number: 65-0172250 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WRIGHT, THOMAS D
9711 OVERSEAS HWY
MARATHON, FL 33050 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: VP,D ( ) Delete
Name: BRUNO, MARTIN
Address: 185 COCONUT AVE.
City-St-Zip: MARATHON, FL 33050

Title: T,D ( ) Delete
Name: MAYETTE, GERALD
Address: PO BOX 501082
City-St-Zip: MARATHON, FL 33050

Title: P, D ( ) Delete
Name: STRUYF, DEBBIE
Address: 6179 OVERSEAS HWY
City-St-Zip: MARATHON, FL 33050

Title: S, D ( ) Delete
Name: STRUYF, KERRY
Address: 6179 OVERSEAS HIGHWAY
City-St-Zip: MARATHON, FL 33050

Title: D ( ) Delete
Name: DOPICO, DENNIS
Address: 6179 OVERSEAS HIGHWAY
City-St-Zip: MARATHON, FL 33050

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: DEBBIE STRUYF P,D 02/22/2008

Electronic Signature of Signing Officer or Director — Date