2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2025
Secretary of State
4378306661CC

DOCUMENT# 747834

Entity Name: NORTH POINTE HOME OWNERS ASSOCIATION OF AUBURNDALE, FLORIDA, INC.

Current Principal Place of Business:

422 S. FLORIDA AVENUE
LAKELAND, FL 33801

Current Mailing Address:

P.O.BOX 1721
AUBURNDALE, FL 33823

FEI Number: 59-1921622

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANOBA, GREG ESQ
422 S. FLORIDA AVENUE
LAKELAND, FL 33801 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

Officer/Director Detail :

Title	VP
Name	ROBERDS, CLYDE
Address	P.O. BOX 1571
City-State-Zip:	AUBURNDALE FL 33823

Title	DIRECTOR
Name	ROBERTSON, MARK
Address	130 NORTH POINTE DR.
City-State-Zip:	AUBURNDALE FL 33823

Title	DIRECTOR
Name	WOOD, CHRIS
Address	114 N. POINTE DR
City-State-Zip:	AUBURNDALE FL 33823

Title	PRESIDENT
Name	PEET, ROBERT
Address	116 N. POINTE DR
City-State-Zip:	AUBURNDALE FL 33823

Title	DIRECTOR
Name	PAGE, LILLIE
Address	118 NORTH POINTE DR.
City-State-Zip:	AUBURNDALE FL 33823

Title	SECRETARY
Name	NOEL, DEBBIE
Address	548 SR559
City-State-Zip:	AUBURNDALE FL 33823

Title	DIRECTOR
Name	ALLEN, BILL
Address	100 N. POINTE DR.
City-State-Zip:	AUBURNDALE FL 33823

Title	TREASURER
Name	WARE, TARA
Address	100 LAKE MATTIE RD
City-State-Zip:	AUBURNDALE FL 33823

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I hereby 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 all other like empowered.

SIGNATURE: ROBERT PEET PRESIDENT 03/24/2025

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	JOHNSON, CYNTHIA
Address	122 N. POINTE DR.
City-State-Zip:	AUBURNDALE FL 33823

Title	DIRECTOR
Name	BUZZI, CHRISTINE
Address	133 N. POINTE DR.
City-State-Zip:	AUBURNDALE FL 33823

Title	DIRECTOR
Name	MCCUE, TAMMY
Address	132 N. POINTE DR.
City-State-Zip:	AUBURNDALE FL 33823