

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05733

Entity Name: THE SOUTHPOINTE ASSOCIATION, INC.

Current Principal Place of Business:

5303 ORTEGA BLVD
UNIT 100
JACKSONVILLE, FL 32210

Current Mailing Address:

5303 ORTEGA BLVD
UNIT 100
JACKSONVILLE, FL 32210 US

FEI Number: 59-2458071

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INGLIS, PHILIP
5303 ORTEGA BLVD.
UNIT 202
JACKSONVILLE, FL 32210 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: PHILIP INGLIS

03/18/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name O'HORA, JAMES R
Address 5303 ORTEGA BLVD
 UNIT 106
City-State-Zip: JACKSONVILLE FL 32210

Title TREASURER
Name RUNION, JOHN
Address 5303 ORTEGA BLVD
 302
City-State-Zip: JACKSONVILLE FL 32210

Title DIRECTOR
Name ELLIS, A LYNN
Address 5303 ORTEGA BLVD.
 204
City-State-Zip: JACKSONVILLE FL 32210

Title SECRETARY
Name INGLIS, PHILIP
Address 5303 ORTEGA BLVD
 APT. 202
City-State-Zip: JACKSONVILLE FL 32210

Title DIRECTOR
Name SMITH, LARRY ESQ.
Address 5303 ORTEGA BLVD
 APT. 104
City-State-Zip: JACKSONVILLE FL 32210

Title DIRECTOR
Name ARAGON, MANUEL
Address 5303 ORTEGA BLVD
 UNIT 105
City-State-Zip: JACKSONVILLE FL 32210

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: PHILIP INGLIS

SECRETARY

03/18/2024

Electronic Signature of Signing Officer/Director Detail

Date