

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001378

Entity Name: NORTH POINTE HOMEOWNERS ASSOCIATION OF LAKE WALES, INC.**Current Principal Place of Business:**28609 HW 27 NORTH DUNDEE
DUNDEE, FL 33838**Current Mailing Address:**P.O. BOX 510
NORTH DUNDEE, FL 33838 US**FEI Number: 59-3179567****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PROPERTY SERVICES, GARRISON
28609 HW 27 NORTH DUNDEE
DUNDEE, FL 33838 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: GARRISON PROPERTY SERVICES****01/22/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name ALVARADO, EVELYN
Address 28609 HWY 27
City-State-Zip: DUNDEE FL 33838

Title TREASURER
Name PETHERICK, JEANNE
Address 28609 HWY 27
City-State-Zip: DUNDEE FL 33838

Title DIRECTOR
Name HENRICHS, TREVOR
Address 28609 HWY 27
City-State-Zip: DUNDEE FL 33838

Title PRESIDENT
Name DENTON, CHUCK
Address 28609 HWY 27
City-State-Zip: DUNDEE FL 33838

Title SECRETARY
Name HUFF, BEVERLY
Address 28609 HWY 27
City-State-Zip: DUNDEE FL 33838

Title DIRECTOR
Name SNYDER, JANET
Address 28609 HW 27 NORTH DUNDEE
City-State-Zip: DUNDEE FL 33838

Title TREASURER
Name GREENIDGE, DESIREE
Address 28609 HWY 27
City-State-Zip: DUNDEE FL 33838

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: CHUCK DENTON**PRESIDENT****01/22/2022**

Electronic Signature of Signing Officer/Director Detail

Date