

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000003556

**FILED  
Apr 23, 2013  
Secretary of State  
CC8781594473**

**Entity Name:** EAGLE POINT COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

5522 N NW 43RD STREET  
SUITE B  
GAINESVILLE, FL 32653

**Current Mailing Address:**

5522 N NW 43RD STREET  
SUITE B  
GAINESVILLE, FL 32653 US

**FEI Number: 59-3425410**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BOSSHARDT PROPERTY MANAGEMENT LLC  
5522 NW 43 STREET  
SUITE B  
GAINESVILLE, FL 32653 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            TD  
Name            JOHNSON, JONI  
Address        5522-B NW 43 STREET  
City-State-Zip: GAINESVILLE FL 32653

Title            PRESIDENT  
Name            KAYE, STAN  
Address        5522-B NW 43 STREET  
City-State-Zip: GAINESVILLE FL 32653

Title            DIRECTOR  
Name            WEEKS, JEN  
Address        5522-B NW 43 STREET  
City-State-Zip: GAINESVILLE FL 32653

Title            SECRETARY  
Name            TENER, KEN  
Address        5522 N NW 43RD STREET  
                 SUITE B  
City-State-Zip: GAINESVILLE FL 32653

*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: STAN KAYE**

**PRESIDENT**

**04/23/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date