

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2007 8:00 am
Secretary of State

05-09-2007 90106 009 ****61.25

DOCUMENT # 716921

1. Entity Name
BAYWAY ISLES - POINT BRITTANY THREE CORPORATION, INC.



Principal Place of Business
**5055 BRITTANY DRIVE SOUTH
ST PETERSBURG, FL 33715 US**

Mailing Address
**5055 BRITTANY DRIVE SOUTH
ST PETERSBURG, FL 33715 US**

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip

City & State
Zip

Country

Country

04122007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-1514593

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**KOCH, KARIN
5055 BRITTANY DRIVE SOUTH
ST PETERSBURG, FL 33715**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

Filing Fee is **\$61.25**
Due by **May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCKENNA, JOHN 530 BRITTANY DR S SAINT PETERSBURG, FL 33715 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Sheila Brockerick 5130 Brittany Dr S St. Petersburg FL 33715 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WHITE, DIANE 5130 BRITTANY DRIVE SOUTH ST PETERSBURG, FL 33715 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Diane White 5130 Brittany Dr S St Petersburg, FL 33715 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TODD, JANET 5130 BRITTANY DRIVE SOUTH ST PETERSBURG, FL 33715 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Beatriz Silveira 5130 Brittany Dr S St. Petersburg, FL 33715 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KANE, PAT S 5130 BRITTANY DRIVE SOUTH ST PETERSBURG, FL 33715 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Richard Hitchcock 5130 Brittany Dr S St. Petersburg, FL 33715 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KRAUSE, SANDRA 5130 BRITTANY DRIVE SOUTH ST PETERSBURG, FL 33715 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director John Farnham 5130 Brittany Dr S St. Petersburg, FL 33715 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Rosemary Macklin 5130 Brittany Dr S St. Petersburg, FL 33715 <input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kane Mckenna President 4/17/07 721
812-2655
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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Division of Corporations

Annual Report

[Annual Report Help](#)

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716921

Business Entity Name

BAYWAY ISLES - POINT BRITTANY THREE CORPORATION, INC.

FEI Number 591514593
FEI Number Status ☒ Listed Above ☐ Applied For ☐ Not Applicable
Certificate of Status Desired ☐ Yes ☒ No \$8.75 each
Election Campaign Financing Trust Fund Contribution ☐ Yes ☒ No

Principal Place of Business

Address 5055 BRITTANY DRIVE SOUTH
Suite, Apt. #, etc.
City, State ST PETERSBURG, FL
Zip Code & Country 33715 US

Mailing Address

Address 5055 BRITTANY DRIVE SOUTH
Suite, Apt. #, etc.
City, State ST PETERSBURG, FL
Zip Code & Country 33715 US

Name and Address of Registered Agent

Name (Last, First, Middle, Title) KOCH, KARIN, ,

- OR -

Business to serve as RA

Address (PO Box is not acceptable) 5055 BRITTANY DRIVE SOUTH
Suite, Apt. #, etc.
City, State ST PETERSBURG, FL
Zip Code & Country 33715 US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business

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entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06, Florida Statutes.

Officer/Director Name and Address

Our database can hold up to 6 officers/directors. If more than 6 officers/directors need to be made a part of the record, you cannot file the annual report online. You will need to download an annual report and list the additional officers/directors, title(s), name, and address on an attachment.

Title PD
Name (Last, First, Middle, Title) WHITE, DIANE, ,

- OR -

Entity Name to serve as
Officer/Director

Street Address 530 BRITTANY DR S
City, State SAINT PETERSBURG, FL
Zip Code & Country 33715

Title VPD
Name (Last, First, Middle, Title) BRODERICK, SHEILA, ,

- OR -

Entity Name to serve as
Officer/Director

Street Address 5130 BRITTANY DRIVE SOUTH
City, State ST PETERSBURG, FL
Zip Code & Country 33715

Title SD
Name (Last, First, Middle, Title) HITCHCOCK, RICHARD, ,

- OR -

Entity Name to serve as
Officer/Director

Street Address 5130 BRITTANY DRIVE SOUTH
City, State ST PETERSBURG, FL
Zip Code & Country 33715

Title D

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Name (Last, First, Middle, Title)

FARNHAM

JOHN

- OR -Entity Name to serve as
Officer/Director

Street Address

5130 BRITTANY DRIVE SOUTH

City, State

ST PETERSBURG, FL

Zip Code & Country

33715

Title

TD

Name (Last, First, Middle, Title)

SILVIERA

ALBERTA

- OR -Entity Name to serve as
Officer/Director

Street Address

5130 BRITTANY DRIVE SOUTH

City, State

ST PETERSBURG, FL

Zip Code & Country

33715

Title

D

Name (Last, First, Middle, Title)

MACKLIN

ROSEMARY

- OR -Entity Name to serve as
Officer/Director

Street Address

5130 BRITTANY DR S

City, State

ST PETERSBURG, FL

Zip Code & Country

33715

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

Officer/Director Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.