

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722877

FILED  
Jan 29, 2009  
Secretary of State

**Entity Name:** BERKLEY HOUSE OF PORT CHARLOTTE- A CONDOMINIUM, INC.

**Current Principal Place of Business:**

CHARLOTTE SQUARE CONDOMINIUMS  
MANAGER'S OFFICE 2296 AARON STREET  
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

**Current Mailing Address:**

CHARLOTTE SQUARE CONDOMINIUMS  
MANAGER'S OFFICE 2296 AARON STREET  
PORT CHARLOTTE, FL 33952

**New Mailing Address:**

**FEI Number:** 59-1574987

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOORE, DON  
C/O MANAGEMENT OFFICE  
2296 AARON STREET  
PORT CHARLOTTE, FL 33952 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MOORE, DON  
Address: 21300 BRINSON AVE #116  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: VPD ( ) Delete  
Name: ANDERSON, ARTHUR  
Address: 21300 BRINSON AVE #209  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: TD ( ) Delete  
Name: POTTS, PEG  
Address: 21300 BRINSON AVE #104  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: SD ( ) Delete  
Name: MOORE, SUSAN  
Address: 21300 BRINSON AVE #116  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: THOMPSON, NEIL  
Address: 21300 BRINSON AVE #115  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: BENKOCY, GERALDINE  
Address: 21300 BRINSON AVE #214  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: DR ( ) Change (X) Addition  
Name: DAHL, HELEN  
Address: 21300 BRINSON AVE #201  
City-St-Zip: PORT CHARLOTTE, FL 33952

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DON MOORE

PD

01/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date