

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91052 019 ****61.25

DOCUMENT # 726193					
1. Entity Name BARKELEY SQUARE CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 2090 BARKELEY LANE SE FT. MYERS, FL 33907			Mailing Address 2090 BARKELEY LANE SE FT. MYERS, FL 33907		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1477525	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MOORHOUSE, EDWARD 2079 BARKELEY LANE #4 FT. MYERS, FL 33907				7. Name and Address of New Registered Agent Name: Matland, Rudolph Street Address (P.O. Box Number is Not Acceptable): 13995 S. Cleveland Ave., Ste. 107 City: Ft. Myers FL Zip Code: 33907	
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: DATE: _____ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))					
Filing Fee is \$61.25 Due by May 1, 2004		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 P NAME CHAMBERS, MARK STREET ADDRESS 2079 BARKLEY LN #17 CITY-ST-ZIP FORT MYERS, FL 33907	☒ Delete		TITLE T NAME Lash, Ken STREET ADDRESS 2079 Barkeley Lane #3 CITY-ST-ZIP Ft. Myers, FL 33907	☐ Change ☒ Addition	
TITLE DS NAME BECKER, SUE STREET ADDRESS 2111 BARKELEY LANE #1 CITY-ST-ZIP FORT MYERS, FL 33907	☐ Delete		TITLE D NAME Wardrope, Anita STREET ADDRESS 2079 Barkeley Lane #7 CITY-ST-ZIP Ft. Myers, FL 33907	☐ Change ☒ Addition	
TITLE D NAME SCHEMEHORN, DICK STREET ADDRESS 2100 BARKELEY LANE CITY-ST-ZIP FORT MYERS, FL 33907	☐ Delete		TITLE DP NAME Schemehorn, Dick STREET ADDRESS 3100 Barkeley Lane CITY-ST-ZIP Ft. Myers, FL 33907	☒ Change ☐ Addition	
TITLE DP NAME GAGE, WILLIAM STREET ADDRESS 2079 BARKELEY LANE, #14 CITY-ST-ZIP FORT MYERS, FL 33907	☐ Delete		TITLE D NAME Gage, William STREET ADDRESS 2079 Barkeley Lane #11 CITY-ST-ZIP Ft. Myers, FL 33907	☒ Change ☐ Addition	
TITLE DT NAME MOORHOUSE, EDWARD STREET ADDRESS 2079 BARKELEY LANE #4 CITY-ST-ZIP FORT MYERS, FL 33907	☒ Delete		TITLE VP NAME Schutz, William STREET ADDRESS 2401 SW 50TH LN CITY-ST-ZIP Cape Coral, FL 33914	☒ Change ☐ Addition	
TITLE D NAME SCHUTZ, WILLIAM STREET ADDRESS 2401 SW 50TH LN CITY-ST-ZIP CAPE CORAL, FL 33914	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date Daytime Phone #					