

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 12 AM 12:24

DOCUMENT # **755412** (4)

1. Corporation Name
BARCLAY SQUARE HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business Mailing Address
C/O CARL SABATELLO
5604 PGA BLVD. SUITE 109
PALM BEACH GARDENS FL 33418
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **12/05/1980** 3a. Date of Last Report **04/26/1994**
4. FEI Number **59-2670612** Applied For
Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 25 Country 29 Country 30 Country

5. Certificate of Status Desired \$0.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
SABATELLO, CARL
5604 PGA BLVD
SUITE 109
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when constituting) _____ DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	RUSSO, JOSEPH
STREET ADDRESS	5604 PGA BLVD, SUITE 109
CITY - ST - ZIP	PALM BEACH GARD. FL
TITLE	STD
NAME	SABATELLO, CARL
STREET ADDRESS	5604 PGA BLVD, SUITE 109
CITY - ST - ZIP	PALM BCH. GARDENS FL
TITLE	VD
NAME	SABATELLO, MICHAEL
STREET ADDRESS	5604 PGA BLVD, SUITE 109
CITY - ST - ZIP	PALM BCH. GARDENS FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	S/T/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	RUSSO, JOSEPH R.
13 STREET ADDRESS	5604 PGA BLVD, SUITE 109
14 CITY - ST - ZIP	PALM BEACH GARDENS, FL
21 TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	SABATELLO, CARL
23 STREET ADDRESS	5604 PGA BLVD., SUITE 109
24 CITY - ST - ZIP	PALM BEACH GARDENS, FL
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	SABATELLO, THEODORE
43 STREET ADDRESS	5604 PGA BLVD., SUITE 109
44 CITY - ST - ZIP	PALM BEACH GARDENS, FL
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: _____ **1-13-95** (407) 626-7600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Carl M. Sabatello, President