

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764420

FILED
Mar 10, 2011
Secretary of State

Entity Name: BRAEMOOR VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US 19 N., SUITE 7Q
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

C/O QUALIFIED PROPERTY MGMT, INC.
5901 US 19 N., SUITE 7Q
NEW PORT RICHEY, FL 34652 US

Current Mailing Address:

C/O QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US 19 N., SUITE 7Q
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

C/O QUALIFIED PROPERTY MGMT, INC.
5901 US 19 N., SUITE 7Q
NEW PORT RICHEY, FL 34652 US

FEI Number: 59-2443888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUALIFIED PROPERTY MANAGEMENT
5901 US 19 N.
SUITE 7Q
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

QUALIFIED PROPERTY MANAGEMENT INC
5901 US 19 N.
SUITE 7Q
NEW PORT RICHEY, FL 34652 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: MARY WHITE

03/10/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SHADDOCK, MARY
Address: 1678 HAMILTON COURT
City-St-Zip: DUNEDIN, FL 34698

Title: TD
Name: WATT, PATRICIA
Address: 1684 HAMILTON COURT
City-St-Zip: DUNEDIN, FL 34698

Title: VP
Name: THOMAS, ELINOR
Address: 1640 HAMILTON COURT
City-St-Zip: DUNEDIN, FL 34698

Title: D
Name: FRAZER, SHARON
Address: 1689 HAMILTON COURT
City-St-Zip: DUNEDIN, FL 34698

Title: SD
Name: DUGGAN, PATRICIA
Address: 1695 HAMILTON COURT
City-St-Zip: DUNEDIN, FL 34698

Title: D
Name: LANGEVIN, NANCY
Address: 1635 HAMILTON COURT
City-St-Zip: DUNEDIN, FL 34698

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: MARY SHADDOCK

PD

03/10/2011

Electronic Signature of Signing Officer or Director

Date