


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 08:00 AM
Secretary of State

DOCUMENT # 766701		
1. Entity Name BARRINGTON OAKS EAST HOMEOWNERS ASSOCIATION, INC.		
Principal Place of Business PO BOX 2392 BRANDON, FL 33509	Mailing Address PO BOX 2392 BRANDON, FL 33509	



04192005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2440030	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRAUDIS, WALTER J JR.
 130 BARRINGTON DR.
 BRANDON, FL 33511

DO NOT WRITE IN THIS SPACE

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: *Walter J. Braudis* DATE: *April 25, 2005*

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, 2005

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BISHOP, TODD 124 BARRINGTON DR. BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BERNALDO, RICK 111 EDMONTON LANE BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BRAUDIS, WALTER J JR. 130 BARRINGTON DR. BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1000000343827
 04/29/05-80108-021 61.25

DO NOT WRITE IN THIS SPACE

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: *Walter J. Braudis* DATE: *April 25, 2005* 813/289-5999

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #