

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
995 MAY 23 PM 1:16
PM 1:11

DOCUMENT # **N08271 (1)**

1. Corporation Name
BRADEN WOODS PHASE V HOMEOWNERS'S ASSOCIATION, I NC.

Principal Place of Business Mailing Address
PO BOX 20223 BRADENTON FL 34203 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/20/1985** 3a. Date of Last Report **05/01/1994**
4. FEI Number **59-2520653** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 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

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

9. Name and Address of Current Registered Agent
**GURZELL, YVONNE
9015 PINE NEEDLE CIRCLE
BRADENTON FL 34202**

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 conditions of Section 607.0507, Florida Statutes.

SIGNATURE *Yvonne Rene Gurzell* Mrs. *Yvonne Rene Gurzell* DATE **5/11/95**
Signature, typed or printed name of registered agent, if this is applicable (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	GURZELL, YVONNE
STREET ADDRESS	9015 PINE NEEDLE CIRCLE
CITY - ST - ZIP	BRADENTON FL
TITLE	SD
NAME	DICKEY, DAVID
STREET ADDRESS	9003 61ST AVE DR E
CITY - ST - ZIP	BRADENTON FL
TITLE	VD
NAME	MESHBERGER, ROGER
STREET ADDRESS	6220 91ST ST E
CITY - ST - ZIP	BRADENTON FL
TITLE	TD
NAME	LAMBERT, PAUL
STREET ADDRESS	9021 63RD AVE E
CITY - ST - ZIP	BRADENTON FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	PD FARINA, ANGELIKA
13 STREET ADDRESS	6319 Forrester Dr.
14 CITY - ST - ZIP	Bradenton, FL 34202
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	Yvonne Rene Gurzell
23 STREET ADDRESS	9015 Pine Needle Cir
24 CITY - ST - ZIP	Bradenton, FL. 34202
31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	STEVEN E. BACROW
33 STREET ADDRESS	5414 PINE TREE DR
34 CITY - ST - ZIP	BRADENTON, FL 34202
41 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	TREASURER AURIL DOBRIN
43 STREET ADDRESS	9023 PINE TREE CIRCLE
44 CITY - ST - ZIP	BRADENTON, FLORIDA 34202
51 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	SD Robert Hubsbeck
53 STREET ADDRESS	9018 Seibel Palm Circle
54 CITY - ST - ZIP	Bradenton, FL 34202
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 on an attachment with an address.

SIGNATURE: *Yvonne Rene Gurzell* *Yvonne Rene Gurzell* DATE **5/11/95** **378-6964**
Signature and typed or printed name of signing officer or director Date Telephone