2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State
04-27-2005 90278 008 ****61.25

DOCUMENT # N25276

1. Entity Name
BERKLEY WOODS OWNERS ASSN., INC.

Principal Place of Business	Mailing Address
~~8514 CAITLIN CT~~ ~~HUDSON, FL 34667 US~~	P.O. BOX 7137 7131 corrected 14UU1049 HUDSON, FL 34674-7131 US

01142005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	P.O. Box 7131 Suite, Apt. #, etc.
City & State	City & State: Hudson, Fla
Zip / Country	Zip: 34674 / Country: USA

4. FEI Number ~~59-2875360~~ 59-2970350 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PEYTON, DONALD R 7317 LITTLE RD. NEW PORT RICHEY, FL 34654	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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, 2005

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P PETTLO, RHONDA 8537 ASHBURY DR. HUDSON, FL 34667	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SCHAAF, EDWARD 8545 ASHBURY DR. HUDSON, FL 34667	☑ Delete	TITLE Vice President Catherine Siciliano 8515 Caitlin Ct. Hudson, Fla. 34667	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DEAN, ROBERT 8508 CAITLIN CT HUDSON, FL 34667	☐ Delete	TITLE Treasurer Dean, Robert 8505 Caitlin Ct., Hudson, Fla 34667	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SAVOLDY, WALTER 8535 CAITLIN CT. HUDSON, FL 34667	☑ Delete	TITLE Sec Barbara L. FREDRICKSEN 8634 Ashbury DR. Hudson, Fla. 34667	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE member Salvatore Petro 8515 Ashbury DR, Hudson, Fla. 34667	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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: Barbara L. Fredricksen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #