2002 UNIFORM BUSINESS REPORT (UBR)

Secretary of State **DOCUMENT # N27824** 1. Entity Name 02-06-2002 90012 002 ****61.25 BARBERRY HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 1380 S PATRICK DRIVE 1360 S PATRICK DRIVE SATELLITE BEACH FL 32937 SATELLITE BEACH FL 32937 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2911573 Not Applicable \$8.75 Additional Fee Required Zip Country Country 5. Certificate of Status Desired . . . 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CHITTY & ASSOCIATES, ACCOUNTANTS INC 1360 S PATRICK DR SATELLITE BEACH FL 32937 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. SIGNATURE Signature, typed or primad name of registered agent and little if applicable (NOTE: Registered Agent Rignature required when reinstating) DATE 9. Election Campaign Financing Make Check Pavable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 XX Detete (6) Change XX Addition TITLE TITLE LAUGHLIN, JOHN Linda Bird NAME NAME 43 SUNSET ST 99 Sunset Street STREET ADDRESS STREET ADDRESS **CR2E037** CITY-ST-ZIP SATELLITE BEACH FL 32937 CITY-ST-ZIP Satellite Beach, FL 32937 TITLE XXI Delete TITLE Change XX Addition FLEIS, EDWARD M NAME NAME Linda Keller 1090 A1A STE 212 STREET ADDRESS STREET ADDRESS 95 Sunset Street Satellite Beach, FL SATELLITE BEACH FL 32937 32937 CitY-St-218 CITY-ST-7P TITLE --Delete TIM F - Change Addition FLEIS, JEFFREY-E -NAME NAME 1090 A1A STE 212 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SATELLITE BCH FL 32937 CITY-ST-ZIP **VPD** TITLE ☐ Delete TITLE XX Change ☐ Addition PD HILL GENE NAME NAME Hill, Gene **49 SUNSET ST** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SATELLITE BEACH FL 32937 CITY - ST - ZIP TITLE XX Delete TITLE ☐ Change ☐ Addition PETRAE, DENISE NAME NAME STREET ADDRESS 64 SUNSET ST STREET ADDRESS SATELLITE BEACH FL 32937 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3Xi), 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 eath; 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 SIGNATURE:

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FILED

Mar 20, 2002 8:00 am