

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N34173 (7)

1. Corporation Name

BRITTANY PARK HOMEOWNERS ASSOCIATION, INC.

3/797



Principal Place of Business

916 LINN HARBOR CT.
TARPON SPRINGS FL 34689
US

Mailing Address

916 LINN HARBOR CT
TARPON SPRINGS FL 34689
US

University Prop.
824 E. Fletcher Ave.
Tampa, FL 33612

3. Date Incorporated or Qualified
09/14/1989

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 CIO VPD
Suite, Apt. #, etc.

22 824 E. Fletcher Ave.

City & State

23 Tampa, Fla.

Zip

24 33612

Country

25 USA

2a. Mailing Address

26 CIO VPD
Suite, Apt. #, etc.

27 824 E. Fletcher Ave.

City & State

28 Tampa, Fla.

Zip

29 33612

Country

30 USA

4. FEI Number
59-3038334

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

STAFFENBERG, SHERRY A
736 BRITTANY PARK BLVD
TARPON SPRINGS FL 34689

10. Name and Address of New Registered Agent

81 Name Laura Rayburn
82 Street Address P.O. Box Number is Not Acceptable
1968 Boyshone Blvd.
83
84 City Dunedin FL 85 Zip Code 34698

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent (if title is applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

3/23/96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
VPD	DONAHOO, JANICE	755 BRITTANY PARK BLVD.	TARPON SPRINGS FL	<input type="checkbox"/>
PD	ROLLINS, CLARK T	916 LINN HARBOR	TARPON SPRINGS FL	<input type="checkbox"/>
STB	DONAHOO, JAMES	755 BRITTANY PARK BLVD.	TARPON SPRINGS FL	<input type="checkbox"/>
XP	LIMPERIS, CHARLES	743 BRITTANY PARK BLVD	TARPON SPRINGS FL	<input type="checkbox"/>
SVP	STAFFENBERG, SHERRI	736 BRITTANY PARK BLVD	TARPON SPRINGS FL	<input type="checkbox"/>
SCC	DRAPER, WILLIAM	1704 HUNTER LANE	TARPON SPRINGS FL	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
PD	Sherry Staffenberg	736 Brittany Park Blvd	Tarpon Springs, FL 34689	<input checked="" type="checkbox"/>
SD	William Draper	1704 Hunter Lane	Tarpon Springs, FL 34689	<input checked="" type="checkbox"/>
TD	Charles Limperis	743 Brittany Park Blvd	Tarpon Springs, FL 34689	<input checked="" type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/>
	500001779505	-04/15/96--01023--015	***61.25	
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 119.07(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:

Signature typed or printed name of signing officer or director

Sherry Staffenberg - 12-96

Date

Daytime Phone

813-942-7104

CR2E037 (12/95)