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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # N9400001443 (0) BERKSHIRE PLACE ASSOCIATION, INC.						
				I HEALING ALE VENE ELEVE ERALI ARIK] 21 ()) 31 () 21 (2) (41() 3)()
Principal Plac	ce of Business	Mailing Address				
1501 WATERFORD DR. VENICE FL 34292		1501 WATERFORD DR. VENICE FL 34292				
2 Depote I	Place of Business			3. Date Incorporated or Qualified 03/23/1994	3a. Date of Last 05/01/1	
2. Principar P	race of Business	2a. Mailing Address		4. FEI Number 65-0482963		Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$9.75	Not Applicable Additional
22 Crty & Stal	te	City & State		5. Certificate of Status Desired		Required
23		28		6. Election Campaign Financing		O May Be
Zip 24	Country	Zip	Country	Trust Fund Contribution 8. This corporation has liability for in	Adde	d to Fees
24	9. Name and Address of Curr	29	30	Florida Statutes	LYes ☐ No	199.032,
	V. THE BUILDING BY COLL	em registered Agent	81 Name	10. Name and Address of New Re	gistered Agent	
MOINT	/RE, SHAWN R			JAME E. PARRIS	+	
	ATERFORD DR.		82 Street A	Address (P.O. Box Number is Not Acceptable	700	
. VENICE	FL 34292		83	1501 WATERFORD	υ κ	
			84 City			
		~		enice		Code
43 Dunning	4 - 40					9676
1 Pursuant or register	to the provisions of Sections 617,050 red agent, or both, in the State of Flo	02 and 617.1308, Florida Statut orida. Such change was authoriz	es, the above-named con	poration submits this statement for the purp	ose of changing its re	egistered office
	to the provisions of Sections 617.05 red agent, or both, in the State of Flo ith, and accept the obligations of, Se	02 and 617.1308, Florida Statut orida. Such change was authoriz ction 617.0803, Florida Statutes	es, the above-named con	poration submits this statement for the purp locard of directors. I hereby accept the appoin	ose of changing its rentment as registered	egistered office agent. I am
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TOTAL OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR