

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Apr 11, 2006 8:00 am
Secretary of State

04-11-2006 90099 014 ****61.25



DOCUMENT # N94000001443
1. Entity Name
BERKSHIRE PLACE ASSOCIATION, INC.

Principal Place of Business Mailing Address
1309 BERKSHIRE COURT 1309 BERKSHIRE COURT
VENICE FL 34292 VENICE FL 34292



2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
181 Center Rd

City & State City & State
Venice FL

Zip Country Zip Country
34285 USA

4. FEI Number *65-0482989* Applied For
~~65-0482963~~ Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

1st MOORE CR2E037 (10/05)

6. Name and Address of Current Registered Agent
GILLEN, KENNETH S
1336 BERKSHIRE CT
VENICE FL 34292

7. Name and Address of New Registered Agent
Name *ARGUS MGMT. OF VENICE, INC.*
Street Address (P.O. Box Number is Not Acceptable)
181 CENTER RD.
City *VENICE* FL Zip Code *34285*

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 *Barbara O'Neil*
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DICKERSON, RANDALL 1331 BERKSHIRE CT. VENICE FL 34292 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MILLER, FRAN 1339 BERKSHIRE CT VENICE FL 34292 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GILLEN, KENNETH 1336 BERKSHIRE CT VENICE FL 34292 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LYNCH, JOHN R 1368 BERKSHIRE CT VENICE FL 34292 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LARGAY, JULIA E 1314 BERKSHIRE CT VENICE FL 34292 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <i>CUNNEEN, TOM</i> <i>1340 BERKSHIRE CT.</i> <i>VENICE, FL 34292</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <i>POWELL, MINNIE</i> <i>1330 BERKSHIRE CT.</i> <i>VENICE, FL 34292</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <i>BRIGHT, DALE</i> <i>1371 BERKSHIRE CT.</i> <i>VENICE, FL 34292</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <i>HALE, DICK</i> <i>1375 BERKSHIRE CT</i> <i>VENICE, FL 34292</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 or without other like empowered.

SIGNATURE: *Charles Richard HALE, DICK HALE* 3/7/06 944-454-8879



ATTACHMENT

CINCINNATI OH 45999-0038

In reply refer to: 0243327111

Mar. 16, 2006 LTR 147C E0

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BODC: SB

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BERKSHIRE PLACE ASSOCIATION INC
1309 BERKSHIRE CT
VENICE FL 34292-1551099



004825

Employer Identification Number: 65-0482989

Dear Taxpayer:

We received your request of Mar. 06, 2006, asking us to verify your Employer Identification Number (EIN) and name.

The name and address of record is: Berkshire Place Association Inc.
1309 Berkshire Court Venice, FL 34292-1551 099 The Employer
Identification Number of record is: 65-0482989

If you have any questions, please call us toll free at 1-800-829-0115.

If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Also, you may want to keep a copy of this letter for your records.

Telephone Number () _____ Hours _____