


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90037 018 ****61.25

DOCUMENT # N94000001443 1. Entity Name BERKSHIRE PLACE ASSOCIATION, INC.			
Principal Place of Business 1309 BERKSHIRE COURT VENICE FL 34292		Mailing Address 181 CENTER ROAD VENICE FL 34285	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E037 (10/06)

6. Name and Address of Current Registered Agent / ARHUS MGMT. OF VENICE, INC 181 CENTER ROAD VENICE FL 34285		7. Name and Address of New Registered Agent Name - ARGUS MGMT. OF VENICE, INC. Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____ (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, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																		
<table border="1"> <tr> <td>NAME</td> <td>D CUNNEEN, TOM</td> <td><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td>1340 BERKSHIRE CT</td> <td></td> </tr> <tr> <td>CITY ST ZIP</td> <td>VENICE FL 34292</td> <td></td> </tr> </table>	NAME	D CUNNEEN, TOM	<input type="checkbox"/> Delete	STREET ADDRESS	1340 BERKSHIRE CT		CITY ST ZIP	VENICE FL 34292			<table border="1"> <tr> <td>NAME</td> <td>SECY</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>KOEHLER, SANDY</td> <td></td> </tr> <tr> <td>CITY ST ZIP</td> <td>1326 BERKSHIRE CT VENICE, FL 34292</td> <td><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table>	NAME	SECY	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS	KOEHLER, SANDY		CITY ST ZIP	1326 BERKSHIRE CT VENICE, FL 34292	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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 all other like empowered.

SIGNATURE: Richard Hale - RICHARD HALE 3/15/07 941-484-8879

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #