FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

1. Corporation Name												
BRIGHTON PLACE HOMEOWNERS ASSOCIATION, INC.									I TRACIUM: AND MUNIC ARRIV AND ARCH BARNE MARKET PARIS ARRIVATION MARKET FOR COMPANY			
Principal Place of Business Mailing Address										T A SECURIO IN A SELECTION CONTRACTION OF A SECULO OF A SECUE OF A SE		
3298 SUMMIT BLVD 3298 SUMMIT BLVD										3. Date Incorporated or Qualified		
SUITE 4 SUITE 4										02/24/1995		
PENSACOLA FL 32504 PENSACOLA FL 32504										4. FEI Number Applied For		
										59-3312117 Not Applicable		
2. Principal Place of Business 2a, Mailing Addre										5. Certificate of Status Desired S8.75 Additional		
21			26 Suite And the sta						Fee Required			
Sulte, Apt.	₩, OC.		27	Suite, Apt. #, etc.					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
City & Stat	8		-	City & State					7. Is this nonprofit corporation a homeowners association?			
23				28	28					☐ Yes ☐ No		
Zip	_ Zip		Country		·		Country			8. This corporation owes or has paid the current year Intangible		
24	0 Nome	25	[29] 5 Address of Current Registered Agent			30	30			Personal Property Tax due June 30. Yes No 10, Name and Address of New Registered Agent		
	3 , 1484144	S SIIO AU	areas of Corre	ii negisi	ALDO WALL		81	IN	lame	ID. Hallis and Address of these Capitations April		
ETHERIDGE, RAY						82	1		(DO D. 1)			
	JMMIT BLV	/D.					8	Street Address (P.O. Box Number is Not Acceptable)				
	SUITE 4						83					
PENSACOLA FL 32504							84	10	ity	85 Zip Code		
41 Divergent to the provisions of Captions 617 0500 and 617 1500 Florida Statutes the							abov	D-D	named corporation submits this statement for the purpose of changing its radistant			
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 and title it applicable (NOTE Registered Agent								ent si	gnature required			
12.	00		OFFICERS AND DIRECTORS				3.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	CLIDICY	Obuco				1.1 TITLE		Į	☐ Change ☐ Addition		
NAME			HRISTOPHER HITVIEW PLACE				1.2 NAME					
STREET ADDRESS			ENT FL 32533			•	1.3 STREET ADDRES		1			
CITY-ST-ZIP	VPD	1 20 100 100 100 100 100 100 100 100 100	1 6 05000		DELETE		TITLE	51-21	<u> </u>	☐ Change ☐ Addition		
NAME	1	IELL. DA	VMD				NAME		}	2 5.2.4		
STREET ADDRESS		,	EW PLACE				STREET	T ADO	RESS			
CITY-ST-ZIP	CANTONMENT FL 32533						2. 4 CITY-ST-ZIP		1			
TITLE	STD				DELETE		TITLE			Change Addition		
NAME	WOOD,	RANDY				3.2	NAME					
STREET ADDRESS			EW PLACE			3.3	STREET	T ADD	RESS			
CITY-ST-ZIP		MMENT	FL 32533			_	CITY-	ST-2	IP			
TITLE	D				DELETE	4.1	TITLE			Change Addition		
NAME					•		2 NAME					
STREET ADDRESS					4.3 ST			T ADD	ress			
CITY-ST-ZIP					☐ DELETE	4.4 CM TE 5.1 TITL			P	☐ Change ☐ Addition		
TITLE					☐ Officit					CHANGE (AUGRIOR		
					- 1	NAME		pree				
STREET ADDRESS 2337 BRIGHTVIEW PLACE CANTONMENT FL 32533						5.3 STREET A 5.4 CITY - ST			l l			
TITLE					DELETE 6.1 To			1-14		Change Addition		
NAME					<u> </u>		NAME					
STREET ADDRESS							6.3 STREET ADDRESS					
						1			1			

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 chapted, or on an expectation and 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 chapted, or on an expectation of the corporation of the

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May 06 1998 8:00am

Secretary of State