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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000000552

1. Corporation Name

BRIAR PATCH ESTATES HOMEOWNER'S ASSOCIATION, INC

Principal Place of Business

ROUTE 3 BOX 355
LAKE CITY FL 32025

Mailing Address

ROUTE 3 BOX 355
LAKE CITY FL 32025



2. Principal Place of Business

21 Rt 3, Box 355
Suite, Apt. #, etc.

2a. Mailing Address

26 Rt 3, Box 355
Suite, Apt. #, etc.

3. Date Incorporated or Qualified

01/28/1998

4. FEI Number

59-3530739

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

22 City & State

23 Lake City, FL

27 City & State

28 Lake City, FL

24 Zip 32025 Country U.S.

29 Zip 32025 Country U.S.

9. Name and Address of Current Registered Agent

DICKS, J.L.
ROUTE 3 BOX 355
LAKE CITY FL 32025

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D DELETED
NAME DICKS, J.L.
STREET ADDRESS ROUTE 3 BOX 355
CITY-ST-ZIP LAKE CITY FL 32025

TITLE D DELETED
NAME COOK, DONALD
STREET ADDRESS ROUTE 1 BOX 67
CITY-ST-ZIP FORT WHITE FL 32038

TITLE D DELETED
NAME DICKS, HARRY
STREET ADDRESS ROUTE 1 BOX 130
CITY-ST-ZIP LULU FL 32061

TITLE DELETED
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETED
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETED
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Harry Dicks
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 15, 1999 (904) 758-1117
Date Daytime Phone #

CR2E037 (1/1/98)