FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT

1995 5-1-95 B-74463

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 8:19

DOCUMENT # N14361 (2)

1. Corporation Name

BRAMBLE BLUFF HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
~~2180 W SR 434~~ ~~SUITE 5000~~ ~~LONGWOOD FL 32779~~ US	~~2180 W. SR 434~~ ~~SUITE 5000~~ ~~LONGWOOD FL 32779~~ US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/15/1986
3a. Date of Last Report: 03/10/1994
4. FEI Number: 59-2768354 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

~~HART, JAMES W JR~~
~~SENTRY MANAGEMENT~~
~~2180 W. ST. RD. 434, SUITE 5000~~
~~LONGWOOD FL 32779~~

10. Name and Address of New Registered Agent

81 Name: Brett M. Jordan
82 Street Address (P.O. Box Number is Not Acceptable): 2180 Park Ave North
83: Suite 326
84 City: Winter Park FL 85 Zip Code: 32789

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	T	☑ Change ☐ Addition
NAME	SHOOTER, BILL	12 NAME		
STREET ADDRESS	12107 CALABOOSE COURT	13 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL	14 CITY-ST-ZIP		
TITLE	STD	21 TITLE	PD	☑ Change ☐ Addition
NAME	WITMER, JIM	22 NAME		
STREET ADDRESS	749 CAVE HOLLOW LANE	23 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL	24 CITY-ST-ZIP		
TITLE	D	31 TITLE	DST	☑ Change ☐ Addition
NAME	DWYER, WILLIAM	32 NAME		
STREET ADDRESS	606 CAVE HOLLOW LA	33 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL	34 CITY-ST-ZIP		
TITLE	~~V~~	41 TITLE	VP	☑ Change ☐ Addition
NAME	~~FEITH, JOSEPH~~	42 NAME	Goral, Charmaine	
STREET ADDRESS	~~12003 BULLFROG COURT~~	43 STREET ADDRESS	651 Upperriver Ct.	
CITY-ST-ZIP	~~ORLANDO FL~~	44 CITY-ST-ZIP	Orlando, Fl	
TITLE	~~D~~	51 TITLE	D	☑ Change ☐ Addition
NAME	~~RODRIGUEZ, VICTOR~~	52 NAME	Gribben, Elizabeth	
STREET ADDRESS	~~12251 CALABOOSE COURT~~	53 STREET ADDRESS	712 E. Cave Hollow Ln.	
CITY ST ZIP	~~ORLANDO FL~~	54 CITY-ST ZIP	Orlando, Fl	
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: James O. Witmer James Witmer 4/18/95 (407) 647-2622
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0003440