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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N34173

1. Corporation Name
BRITTANY PARK HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business 7001 TEMPLE TERRACE HWY TEMPLE TERRACE FL 33637 US	Mailing Address 7001 TEMPLE TERACE HWY TEMPLE TERRACE FL 33637 US
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2. Principal Place of Business 21 1801 Peppertree Drive Suite, Apt. #, etc.	2a. Mailing Address 26 1801 Peppertree Drive Suite, Apt. #, etc.	3. Date Incorporated or Qualified 09/14/1989
22 City & State 23 Oldsmar, FL	27 City & State 28 Oldsmar, FL	4. FEI Number 59-3038334 Applied For - Not Applicable
24 Zip 34677	25 Country USA	29 Zip 34677
	30 Country USA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

CIANFRONE, JOSEPH R PA 1968 BAYSHORE BLVD. DUNEDIN FL 34698	81 Name
	82 Street Address (P.O. Box Number is Not Acceptable)
	83
	84 City
	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 _____ 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 <input type="checkbox"/> DELETE	1.1 TITLE	STD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HILTON, STEPHEN J	1.2 NAME	
STREET ADDRESS	923 HUNTER LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	TARPON SPRINGS FL	1.4 CITY-ST-ZIP	
TITLE	STD <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOSSO, RICHARD A	2.2 NAME	PD
STREET ADDRESS	919 BRITTANY PARK BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	TARPON SPRINGS FL	2.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BERTETTO, LARRY	3.2 NAME	ANNA WASSON
STREET ADDRESS	1621 NAVIGATOR LANE	3.3 STREET ADDRESS	923 BRITTANY PARK BLVD
CITY-ST-ZIP	TARPON SPRINGS FL 34689	3.4 CITY-ST-ZIP	TARPON SPRINGS FL 34689
TITLE	VP <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LIMPERIS, CHARLES	4.2 NAME	
STREET ADDRESS	743 BRITTANY PARK BLVD	4.3 STREET ADDRESS	
CITY-ST-ZIP	TARPON SPRINGS FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DRAPER, WILLIAM	5.2 NAME	
STREET ADDRESS	1704 HUNTER LANE	5.3 STREET ADDRESS	
CITY-ST-ZIP	TARPON SPRINGS FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: Stephen J. Hilton 1/7/99 727-556-1263
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)