

2001 UNIFORM BUSINESS REPORT (UBR)

1/31

FILED
Mar 01, 2001 8:00 am
Secretary of State

01-31-2001 90058 022 ****61.25

DOCUMENT # N97000005051

1. Entity Name

BRANDY CREEK HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

4432 PARKWAY COMM BLVD
ORLANDO FL 32808

Mailing Address

PO BOX 607098
ORLANDO FL 32860-7098

2. Principal Place of Business

410 Penn First Management, Inc.
Suite, Apt. #, etc.
453 Mark Twain Blvd
City & State
Orlando, FL

Zip
32828

Country
USA

3. Mailing Address

410 Penn First Management, Inc.
Suite, Apt. #, etc.
453 Mark Twain Blvd
City & State
Orlando, FL

Zip
32828

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3466103

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SHOEMAKER, JOHN B
503 N. ORLANDO AVE., STE. 105
COCOA BEACH FL 32931

7. Name and Address of New Registered Agent

Name: Lawrence M. Sheeler
Street Address (P.O. Box Number Is Not Acceptable)
410 Penn First Management, Inc.
453 Mark Twain Blvd.
City: Orlando FL Zip Code: 32828

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.

SIGNATURE: *Lawrence M. Sheeler*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/13/01
DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	☒ Delete
NAME	CAREY, STEVE	
STREET ADDRESS	1318 BRANDY LAKE VIEW CIRCLE	
CITY-ST-ZIP	WINTER GARDEN FL 34787	
TITLE	DP	☒ Delete
NAME	SHOEMAKER, JOHN B	
STREET ADDRESS	503 N. ORLANDO AVE., STE. 105	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE	DS	☒ Delete
NAME	LEE, SYLVIA	
STREET ADDRESS	503 N. ORLANDO AVE., STE. 105	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	☐ Change ☒ Addition
NAME	JEFFREY DRISCOLL	
STREET ADDRESS	1113 BRANDY CREEK DR.	
CITY-ST-ZIP	WINTER GARDEN FL 34787	
TITLE	VICE PRES.	☐ Change ☒ Addition
NAME	INGRID COLLINS	
STREET ADDRESS	1108 BRANDY LAKE VIEW CIR	
CITY-ST-ZIP	WINTER GARDEN FL 34787	
TITLE	SECRETARY - TREASURER	☐ Change ☐ Addition
NAME	RANDY SHUSTER	
STREET ADDRESS	1144 BRANDY LAKE VIEW CIR	
CITY-ST-ZIP	WINTER GARDEN FL 34787	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 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: *John B. Shoemaker*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/01
Date

(407) 905-0277
Daytime Phone #

CR2E037 (10/00)