2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State
05-28-2002 91643 018 ****61.25

DOCUMENT # 737596

1. Entity Name

BRANDYWINE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
PO BOX 1298 DELAND FL 32721	PO BOX 1298 DELAND FL 32721

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
P.O. Box 1298	P.O. Box 1298
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: DeLand, Florida	City & State: DeLand, Florida
Zip: 32721 Country: Volusia	Zip: 32721 Country: Volusia

4. FEI Number: 59-1989295 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Mr. Edward Allen Mr. Edward Allen CALDWELL, OAKLEIGH E 885 LANCASTER RD DELAND FL 32720	Name: Mr. Edward Allan Street Address (P.O. Box Number is Not Acceptable): 2603 Old Church Pl. DeLand, Florida 32720 City: DeLand, Florida FL Zip Code: 32720

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: Ida Giammanco 5/9/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD GINDLE, JANICE 2730 SARATOGA ROAD NORTH DELAND FL 32720	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Mike Frey 1063 Valley Forge Rd. DeLand, Florida 32720	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRIFFIS, SUSAN 1012 VALLEY FORGE RD DELAND FL 32720	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Edward Allan 2603 Old Church PL. DeLand, Florida 32720	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SCHILLIG, WILLIAM 855 LANCASTER RD. DELAND FL 32720	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Susan Griffis 1012 Valley Forge Rd. deLand, Florida 32720	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GIAMMANCO, IDA 2865 VALLEY FORGE RD DELAND FL 32720	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D William Schillig 855 Lancaster Rd. DeLand, Florida 32720	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DONEGAN, MARTHA 851 FREEMANS FARM DELAND FL 32720	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Janice Gindle 2730 Sararoga Road North DeLand, Florida 32720	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STURNICK, EILEEN 954 VILLAGE GREEN RD DELAND FL 32720	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: SIGNATURE REQUIRED Ida Giammanco 5/9/02 386-734-7446
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #