



2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2005 8:00 am
Secretary of State

02-22-2005 90015 037 ****61.25

DOCUMENT # N10936 1. Entity Name BRYN MAWR HOMEOWNERS ASSOCIATION UNIT #5, INC.					
Principal Place of Business 3215 OAKSTAND LANE ORLANDO, FL 32812 US			Mailing Address 3215 OAKSTAND LANE ORLANDO, FL 32812 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		01242005 Chg-NP CR2E037 (10/03)	
4. FEI Number 59-2451453		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COLLINS, CHARLES J 3295 WINDY WOOD DRIVE ORLANDO, FL 32812		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reconstituting) DATE: _____					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		10. OFFICERS AND DIRECTORS			
TITLE - NAME STREET ADDRESS CITY-ST-ZIP	P COLLINS, CHARLES 3295 WINDY WOOD DR ORLANDO, FL 32812	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE - NAME STREET ADDRESS CITY-ST-ZIP	VP MCALLISTER, SALLY 3120 TALL TIMBER ORLANDO, FL 32812	TITLE - NAME STREET ADDRESS CITY-ST-ZIP	Charles Castellon 3211 Oakstand Ln Orlando FL 32812		
TITLE - NAME STREET ADDRESS CITY-ST-ZIP	S BRADY, BARBARA 3407 WINDY WOOD DR ORLANDO, FL 32812	TITLE - NAME STREET ADDRESS CITY-ST-ZIP	Sandi Montavon 3410 Windy Wood Dr. Orlando, FL 32812		
TITLE - NAME STREET ADDRESS CITY-ST-ZIP	D YOUNG, JOHN 3101 TALL TIMBER DR ORLANDO, FL 32812	TITLE - NAME STREET ADDRESS CITY-ST-ZIP	Change Addition		
TITLE - NAME STREET ADDRESS CITY-ST-ZIP	D TORDORF, DENNIS 3299 WINDY WOOD DR ORLANDO, FL 32812	TITLE - NAME STREET ADDRESS CITY-ST-ZIP	Change Addition		
TITLE - NAME STREET ADDRESS CITY-ST-ZIP	D KELLY, PEGGY 3200 WINDY WOOD DRIVE ORLANDO, FL 32812	TITLE - NAME STREET ADDRESS CITY-ST-ZIP	Change Addition		
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: <i>Charles J. Collins</i> Charles J. Collins 2-15-05 407-383-8327					