2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)** 

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Apr 20, 2005 8:00 am Secretary of State **DOCUMENT # 726417** 1. Entity Name 04-20-2005 90332 038 \*\*\*\*61.25 4 BRITTONS OF BARDMOOR, INC. Principal Place of Business Mailing Address SEABOARD ARBORS MANAGEMENT SEABOARD ARBORS MANAGEMENT 20033813 2189 CLEVELAND STREET SUITE 225 CLEARWATER FL 33765 2189 CLEVELAND STREET SUITE 225 CLEARWATER FL 33765 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State Applied For 4. FEI Number 59-2871213 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LEIGHTON, LENNARD A Street Address (P.O. Box Number is Not Acceptable) SEABOARD ARBORS MANAGEMENT 2189 CLEVELAND STREET SUITE 225 **CLEARWATER FL 33765** 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 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 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TETE F Change ☐ Addition SARKIS DERDERIAN, D.O. NAME NAME 8316-A BARDMOOR BLVD STREET ADDRESS STREET ADDRESS LARGO FL 33777 CITY-ST-ZIP CITY-ST-ZIP $\overline{\mathsf{VD}}$ Delete ☐ Change **X** Addition VD WHITE MARGARET WHITE, MARTY 8316B BARDMOOR BLVD STREET ADDRESS STREET ADDRESS 8316-B BARDMOOR BLVD LARGO FL 33777 LARGO FL 33777 CITY-St-7IP CITY-ST-ZIP STD TITLE ☐ Delete TITLE ☐ Change Addition HOPMAN LUCY NAME NAME 8316C BARDMOOR BLVD STREET ADDRESS STREET ADDRESS LARGO FL CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP Delete ☐ Addition ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 12. Thereby 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.

FILED

Date

Daytime Phone #