

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90304 031 ****61.25

DOCUMENT # 737596

1. Entity Name

BRANDYWINE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

**PO BOX 1298
DELAND FL 32721**

Mailing Address

**PO BOX 1298
DELAND FL 32721**

2. Principal Place of Business

P.O. Box 1298

3. Mailing Address

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

~~CALDWELL, OAKLEY E~~ **Mr. Edward Allen**
~~885 LANCASTER RD.~~ **2603 Old Church Pl.**
~~DELAND FL 32720~~ **DeLand, Florida 32721**

Name
Mr. Edward Allen
Street Address (P.O. Box Number is Not Acceptable)
2603 Old Church Pl.

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Ida Giammanco*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/17/03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **SD** ☒ Delete
NAME **GINDLE, JANICE**
STREET ADDRESS **2730 SARATOGA ROAD NORTH**
CITY-ST-ZIP **DELAND FL 32720**

TITLE **D** ☒ Change ☒ Addition
NAME **Janice Gindle**
STREET ADDRESS **2730 Saratoga Road North**
CITY-ST-ZIP **DeLand, Florida 32720**

TITLE **D** ☒ Delete
NAME **GRIFFIS, SUSAN**
STREET ADDRESS **1012 VALLEY FORGE RD**
CITY-ST-ZIP **DELAND FL 32720**

TITLE **PD** ☐ Change ☒ Addition
NAME **Edward Allen**
STREET ADDRESS **2603 Old Church Pl.**
CITY-ST-ZIP **DeLand, Florida 32720**

TITLE **VD** ☐ Delete
NAME **SCHILLIG, WILLIAM**
STREET ADDRESS **855 LANCASTER RD.**
CITY-ST-ZIP **DELAND FL 32720**

TITLE **VD** ☒ Change ☒ Addition
NAME **William Schillig**
STREET ADDRESS **855 Lancaster Rd.**
CITY-ST-ZIP **DeLand, Florida**

TITLE **T** ☐ Delete
NAME **GIAMMANCO, IDA**
STREET ADDRESS **2865 VALLEY FORGE RD**
CITY-ST-ZIP **DELAND FL 32720**

TITLE **SD** ☐ Change ☒ Addition
NAME **Mike Frey**
STREET ADDRESS **1063 Valley Forge Rd.**
CITY-ST-ZIP **DeLand, Florida 32720**

TITLE **D** ☒ Delete
NAME **DONEGAN, MARTHA**
STREET ADDRESS **851 FREEMANS FARM**
CITY-ST-ZIP **DELAND FL 32720**

TITLE **T** ☐ Change ☒ Addition
NAME **Ida Giammanco**
STREET ADDRESS **2865 Valley Forge Rd.**
CITY-ST-ZIP **DeLand, Florida 32720**

TITLE **D** ☒ Delete
NAME **STURNICK, EILEEN**
STREET ADDRESS **954 VILLAGE GREEN RD**
CITY-ST-ZIP **DELAND FL 32720**

TITLE **D** ☐ Change ☒ Addition
NAME **Ronald Smith**
STREET ADDRESS **2780 Princeton Pl.**
CITY-ST-ZIP **DeLand, Florida 32720**

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:

Ida Giammanco

4/17/03

386-734-7446

CR2E037 (10/02)