

2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 764420

Entity Name: BRAEMOOR VILLAGE HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 06, 2017
Secretary of State
CC9429628228

Current Principal Place of Business:

QUALIFIED PROPERTY MGMT, INC.
5901 US HWY. 19 STE. 7Q
NEW PORT RICHEY, FL 34652

Current Mailing Address:

QUALIFIED PROPERTY MGMT, INC.
5901 US HWY. 19 STE. 7Q
NEW PORT RICHEY, FL 34652 US

FEI Number: 59-2443888

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

QUALIFIED PROPERTY MANAGEMENT, INC.
QUALIFIED PROPERTY MGMT, INC.
5901 US HWY. 19 STE. 7Q
NEW PORT RICHEY, FL 34652 US

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: MARY A. WHITE

04/06/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SHADDOCK, MARY
Address QUALIFIED PROPERTY MGMT, INC.
 5901 US HWY. 19 STE. 7Q
City-State-Zip: NEW PORT RICHEY FL 34652

Title VP
Name MCGREEN, J. DENNIS
Address QUALIFIED PROPERTY MGMT, INC.
 5901 US HWY. 19 STE. 7Q
City-State-Zip: NEW PORT RICHEY FL 34652

Title SEC
Name DWYER, DENNIS
Address QUALIFIED PROPERTY MGMT, INC.
 5901 US HWY. 19 STE. 7Q
City-State-Zip: NEW PORT RICHEY FL 34652

Title TREA
Name MCINTYRE, ROD
Address QUALIFIED PROPERTY MGMT, INC.
 5901 US HWY. 19 STE. 7Q
City-State-Zip: NEW PORT RICHEY FL 34652

Title DIRECTOR
Name ALDRICH, CHRIS
Address QUALIFIED PROPERTY MGMT, INC.
 5901 US HWY. 19 STE. 7Q
City-State-Zip: NEW PORT RICHEY FL 34652

Title DIRECTOR
Name CONK, SANDRA
Address QUALIFIED PROPERTY MGMT, INC.
 5901 US HWY. 19 STE. 7Q
City-State-Zip: NEW PORT RICHEY FL 34652

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARY SHADDOCK

PRESIDENT

04/06/2017

Electronic Signature of Signing Officer/Director Detail

Date