

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 765426

**Entity Name:** BRYN MAWR SOUTH HOMEOWNERS ASSOCIATION UNIT #3  
AND #7, INC.**FILED**  
**Feb 04, 2015**  
**Secretary of State**  
**CC5608887702****Current Principal Place of Business:**3149 BRIDGEHAMPTON LN.  
ORLANDO, FL 32812**Current Mailing Address:**3149 BRIDGEHAMPTON LN.  
ORLANDO, FL 32812**FEI Number: 59-2402610****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**KAREN WONSETLER,P.A.  
860 N. ORANGE AVENUE  
SUITE 135  
ORLANDO, FL 32801 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: KAREN WONSETLER****02/04/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** DIRECTOR  
**Name** INMAN, MATTEW  
**Address** 3502 EXETER CT.  
**City-State-Zip:** ORLANDO FL 32812**Title** SECRETARY  
**Name** LANCASTER, JANICE  
**Address** 2926 GOLDEN VIEW LANE  
**City-State-Zip:** ORLANDO FL 32812**Title** TREASURER  
**Name** LANCASTER, JANICE A  
**Address** 2971 BRIDGEHAMPTON LANE  
**City-State-Zip:** ORLANDO FL 32812**Title** VP  
**Name** MIOKOVIC, NICK  
**Address** 4590 SOUTH HAMPTON DR  
**City-State-Zip:** ORLANDO FL 32812**Title** PRESIDENT  
**Name** SMITH, LINDA  
**Address** 3508 EXETER COURT  
**City-State-Zip:** ORLANDO FL 32812

*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: JANICE A. LANCASTER****TREASURER - HOA BOD****02/04/2015**

Electronic Signature of Signing Officer/Director Detail

Date