## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007452

Entity Name: BERRY TOWN CENTER PROPERTY OWNERS' ASSOCIATION,

INC.

Apr 04, 2017 **Secretary of State** CC5188481375

**FILED** 

### **Current Principal Place of Business:**

2520 SAND MINE ROAD DAVENPORT, FL 33897

# **Current Mailing Address:**

C/O FIRSTSERVICE RESIDENTIAL 385 DOUGLAS AVENUE; STE. 3350 ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 90-0067843 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LAW OFFICE OF PATRICK H. WILLIS 150 NORTH ORANGE AVENUE; STE. 418 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: PATRICK H. WILLIS 04/04/2017

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title **DIRECTOR** Title DIRECTOR

Name WILKES, RICHARD Name CHRISTNER, RUSSEL

Address C/O FIRSTSERVICE RESIDENTIAL Address C/O FIRSTSERVICE RESIDENTIAL

385 DOUGLAS AVENUE; STE. 3350 385 DOUGLAS AVENUE; STE. 3350

City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title **DIRECTOR** 

Name SHOEBRIDGE, PHILIP

C/O FIRSTSERVICE RESIDENTIAL Address

385 DOUGLAS AVENUE; STE. 3350

ALTAMONTE SPRINGS FL 32714 City-State-Zip:

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: RICHARD WILKES DIRECTOR 04/04/2017