

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

DOCUMENT# N98000006748

**Entity Name:** BRITTANY PLACE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

ANCHOR ASSOCIATES INC  
3940 RADIO RD, STE 112  
NAPLES, FL 34104

**Current Mailing Address:**

ANCHOR ASSOCIATES INC  
3940 RADIO RD, STE 112  
NAPLES, FL 34104 US

**FEI Number:** 59-3546881

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ANCHOR ASSOCIATES INC  
ANCHOR ASSOCIATES INC  
3940 RADIO RD, STE 112  
NAPLES, FL 34104 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:** SUZANNE OSTRANDER

03/10/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name SUMMERFIELD, PATTI  
Address ANCHOR ASSOCIATES INC  
3940 RADIO RD, STE 112  
City-State-Zip: NAPLES FL 34104

Title VP  
Name ROWE, JIM  
Address ANCHOR ASSOCIATES INC  
3940 RADIO RD, STE 112  
City-State-Zip: NAPLES FL 34104

Title PRESIDENT  
Name OSTRANDER, SUZANNE  
Address ANCHOR ASSOCIATES INC  
3940 RADIO RD, STE 112  
City-State-Zip: NAPLES FL 34104

Title SECRETARY  
Name SUTTON, SHARON  
Address ANCHOR ASSOCIATES INC  
3940 RADIO RD, STE 112  
City-State-Zip: NAPLES FL 34104

Title T  
Name PECORILLI, TOM  
Address ANCHOR ASSOCIATES INC  
3940 RADIO RD, STE 112  
City-State-Zip: NAPLES FL 34104

*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:** SUZANNE OSTRANDER

PRESIDENT

03/10/2015

Electronic Signature of Signing Officer/Director Detail

Date