

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716374

FILED
Apr 08, 2009
Secretary of State

Entity Name: CHATEAUX DE BARDMOOR CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O SEABOARD ARBORS MGMT SVC, INC.
2189 CLEVELAND ST -STE 225
CLEARWATER, FL 34619 US

New Principal Place of Business:

8345 BARDMOOR BLVD
LARGO, FL 33777 US

Current Mailing Address:

C/O SEABOARD ARBORS MGMT SVC, INC.
2189 CLEVELAND ST -STE 225
CLEARWATER, FL 34619 US

New Mailing Address:

7300 PARK STREET
SEMINOLE, FL 33777 US

FEI Number: 59-3041763

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEIGHTON, LENNARD A.
SEABOARD ARBORS MGMT. SVC, INC.
2189 CLEVELAND ST- STE 225
CLEARWATER, FL 34619 US

Name and Address of New Registered Agent:

REINHARDT, DEBBIE
7300 PARK STREET
SEMINOLE, FL 33781 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: DEBBIE REINHARDT

04/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: STRAWZ, MARIE
Address: 8090 CANDLEWOOD RD
City-St-Zip: LARGO, FL 33777

Title: VPD () Delete
Name: PICOTTE, HOWARD
Address: 8082 ANNWOOD ROAD
City-St-Zip: LARGO, FL 33777

Title: D () Delete
Name: STROHOFER, DON
Address: 83 57 CANDLEWOOD ROAD
City-St-Zip: LARGO, FL

Title: PD () Delete
Name: REHBERG, CATHERINE
Address: 8368 CANDLEWOOD RD
City-St-Zip: SEMINOLE, FL 33777

Title: D () Delete
Name: LA BERTH, KATHY
Address: 8112 ANNWOOD RD
City-St-Zip: LARGO, FL

Title: D () Delete
Name: VESCOVI, CHERYL
Address: 8410 ANNWOOD RD
City-St-Zip: LARGO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CATHERINE REHBERG

P

04/08/2009

Electronic Signature of Signing Officer or Director

Date