## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 26 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

737690

(8)

## THE BRIER PATCH PROPERTY OWNERS ASSOCIATION, INC

Principal Place	of Business	Mailing Address				L idanes entlan erite sante datit Effer Afer metre fratt falle biste binte falle binte binter				
11832 BRIER PA	TCH COURT	11868 BRIER PATCH CT.						•		
WEST PALM BC		WEST PALM BCH FL 33414-5903								
US		U\$				9 Date In appropriated as Outliffed	2a Dote of	not Donord		
						3. Date incorporated or Qualified 3s. Date of Last Report 02/09/1996				
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	1 1	Applied For		
21 26						59-1807004	<u> </u>	Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #,			Ċ.				- \$ <del>2</del>	75 Additional		
22		27				5. Certificate of Status Desired		ee Regulred		
City & State City & State						6. Election Campaign Financing	\$5	.00 May Be		
23		28				Trust Fund Contribution		ided to Fees		
Zip	Country Zip Cou			ountry	,	8. This corporation has liability for intangible tax under s. 199.032,				
24	25 29 30					Florida Statutes Yes 🙀 No				
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Reg	istered Agent			
				81	Name					
CHAMPLIN, EARL S.					82 Street Address (P.O. Box Number is Not Acceptable)					
11832 BRIER PATCH COURT				Street Address (F.O. Box Number is Not Acceptable)						
WEST PALM BEACH FL 33414										
				84	City	<del></del>	ToeT	Zin Code		
				**	City		FL  85	Zip Code		
11. Pursuant to the provisions of Sections 617.0502 and 617.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.										
	The triangular triangu	110113 0-1 00011011 0 11 10000,1110	01100 01		<b>.</b>					
SIGNATURE _	Signature, typed or printed name of registered agen	t and title if applicable. [NOT	E: Registe	red Age	ent signature	required when reinstating)	DATE			
12.	OFFICERS AND	DIRECTORS	13	١.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	CTORS IN 12		
TITLE	PD	☐ DELETE	1.1	TITLE		P/D	[ <b>≥</b> Cha	ange 🔲 Addition		
NAME	PANTIN, SEAN		1.2	NAME		GRANT, JAMES				
STREET ADDRESS	11862 BRIER PATCH COURT		1.3	STREET	ADDRESS	11834 BRIER PATCH CT.				
CITY-ST-ZIP	WELLINGTON FL		1.4	CITY-S	T-ZIP	WELLINGTON, FL. 33414				
TITLE	۷D	☐ DELETE	2.1	TITLE		V/D	Cha	ange 🔲 Addition		
NAME	Grant, James		2.2	NAME		AUSTIN, CHRISTOPHER				
STREET ADDRESS	11834 BRIER PATCH COURT		2.3	STREET	ADDRESS	1626 BRIER PATCH TRAIL				
CITY-ST-ZIP	WELLINGTON FL			CITY-	ST-ZIP	WELLINGTON FL 33414	4			
TITLE	SD DELETE		3.1			T/S/D	T Cha	ange Addition		
NAME	Farrell, Brian		3.2	NAME	-	CHAMPLIN, EARL				
STREET ADDRESS	1620 BRIER PATCH TRAIL		3.3	STREET	ADDRESS	11832 BRIER PATCH CT.				
CITY-ST-ZIP	WELLINGTON FL		3.4.	. CITY-!	ST-ZIP	WELLINGTON, FL. 33414	<u> </u>			
TITLE	D	DELETE	4.1	TITLE		D ·	Ch:	ange		
NAME	LETOURNEAU, GARY		4. 2	NAME	]	DOLGENOS, KALMAN				
STREET ADDRESS	11894 BRIER PATCH COURT		4.3	STREET	ADDRESS	11828 BRÍER PATCH CT.				
CITY - ST - ZIP	WELLINGTON FL		4.4	CITY-S	T-ZIP	WELLINGTON, FL. 33414				
TITLE	D	DELETE	5.1	TITLE	1	D	.xd Cha	ange Addition		
NAME	CHRISTENSEN, MARION		52	NAME		MARTONE, MICHAEL				
STREET ADDRESS	11864 BRIER PATCH COURT		53	STREET	ADDRESS	11890 BRIER PATCH CT.				
CITY-ST-ZIP	WELLINGTON FL		5.4	CITY-S	T-ZIP	WELLINGTON, FL, 33414				
TITLE		☐ DELETE	6.1	TITLE	ļ	•	Chi	ange Addition		
NAME			6.2	NAME						
STREET ADDRESS			6.3	STREET	ADDRESS					
CITY-ST-ZIP			6.4	CITY - 9	ST-ZIP					
14. I do hereb	by certify that the information supplied in indicated on this annual report or su	i with this filing does not quality	ify for th	e exe	mption st urate and	tated in Section 119.07(3)(i). Florida Statutes that my signature shall have the same legal	s. I further certify I effect ás if mar	/ that the de 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 in Block 12 or Blocky 3 if changed, or on an attachment with an address.										

EARL S. CHAMPLI

561-793-9934