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Mar 16 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 737690 (8)

1. Corporation Name

THE BRIER PATCH PROPERTY OWNERS ASSOCIATION, INC



Principal Place of Business

11832 BRIER PATCH COURT
WEST PALM BCH FL 33414
US

Mailing Address

11868 BRIER PATCH CT.
WEST PALM BCH FL 33414
US

3. Date Incorporated or Qualified

12/30/1976

4. FEI Number

59-1807004

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?



Yes



No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes



No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHAMPLIN, EARL S.
11832 BRIER PATCH COURT
WEST PALM BEACH FL 33414

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME GRANT, JAMES
STREET ADDRESS 11834 BRIER PATCH CT.
CITY-ST-ZIP WELLINGTON FL

☐ DELETE

TITLE VD
NAME AUSTIN, CHRISTOPHER
STREET ADDRESS 1626 BRIER PATCH TRAIL
CITY-ST-ZIP WELLINGTON FL

☐ DELETE

TITLE TSD
NAME CHAMPLIN, EARL
STREET ADDRESS 11832 BRIER PATCH CT.
CITY-ST-ZIP WELLINGTON FL

☐ DELETE

TITLE D
NAME DOLGENOS, KALMAN
STREET ADDRESS 11828 BRIER PATCH CT.
CITY-ST-ZIP WELLINGTON FL

☐ DELETE

TITLE D
NAME MARTONE, MICHAEL
STREET ADDRESS 11890 BRIER PATCH CT.
CITY-ST-ZIP WELLINGTON FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

P/D
Santucci, Michael
11862 Brier Patch Ct.
Wellington, FL. 33414

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

V/D
Schietz, Ehud
11888 Brier Patch Ct.
Wellington, FL. 33414

☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

S/D
Champlin, Earl
11832 Brier Patch Ct.
Wellington, FL. 33414

☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

T/D
Dolgenos, Kalman
11828 Brier Patch Ct.
Wellington, FL. 33414

☒ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

D
Grant, Jim
11834 Brier Patch Ct.
Wellington, FL. 33414

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

3/5/98

511-793-9934

CR2E037 (1097)