FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 27 AM 9:04

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **745691** **(6)**

1. Corporation Name

BRAE MOOR ESTATES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1512 GLEN HOLLOW LANE N DUNEDIN FL 34698	1512 GLEN HOLLOW LANE N DUNEDIN FL 34698

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/24/1979
3a. Date of Last Report: 04/26/1994
4. FEI Number: 59-2895816 ☐ Applied For ☐ Not Applicable
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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 1527 Glen Hollow Ln N	26 1527 Glen Hollow Ln N
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Dunedin	28 City & State: Dunedin
24 Zip: 34698 25 Country: Pinellas	29 Zip: 34698 30 Country: Pinellas

9. Name and Address of Current Registered Agent

BRIEN, DAVID J.
1527 GLEN HOLLOW LANE, NORTH
DUNEDIN FL 34698

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0502, Florida Statutes.

SIGNATURE: David J. Brien — 3/31/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	11 TITLE	V/P ☑ Change ☐ Addition
NAME	STONELEY, ELLEN ✓	12 NAME	LOEFFERT, SUSAN
STREET ADDRESS	1565 BRAEMOOR LANE	13 STREET ADDRESS	1571 GLEN HOLLOW Ln S.
CITY-ST-ZIP	DUNEDIN FL	14 CITY-ST-ZIP	Dunedin FL 34698
TITLE	S	21 TITLE	☐ Change ☐ Addition
NAME	KING, DOROTHY ✓	22 NAME	
STREET ADDRESS	1520 BRAEMOOR LANE	23 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL	24 CITY-ST-ZIP	
TITLE	T	31 TITLE	☐ Change ☐ Addition
NAME	BRIEN, DAVID J. ✓	32 NAME	
STREET ADDRESS	1527 GLEN HOLLOW LANE, NORTH	33 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL	34 CITY-ST-ZIP	
TITLE	D	41 TITLE	(D) ☑ Change ☐ Addition
NAME	LINDSAY, HEATHER ✓	42 NAME	PARKER, Donna
STREET ADDRESS	15521 GLEN HOLLOW LN N	43 STREET ADDRESS	1537 GLEN Hollow Ln N
CITY-ST-ZIP	DUNEDIN FL	44 CITY-ST-ZIP	Dunedin FL 34698
TITLE	P	51 TITLE	☑ Change ☐ Addition
NAME	WELCH, NORMAN ✓	52 NAME	MEEHAN, LISA
STREET ADDRESS	15471 GLEN HOLLOW LANE N.	53 STREET ADDRESS	1530 BRAE MOOR Ln
CITY-ST-ZIP	DUNEDIN FL	54 CITY-ST-ZIP	Dunedin FL 34698
TITLE	D	61 TITLE	(D) ☑ Change ☐ Addition
NAME	MEEHAN, LISA ✓	62 NAME	PRICE Buffy
STREET ADDRESS	1530 BRAEMOOR LANE	63 STREET ADDRESS	1878 BRAEMOOR DR.
CITY-ST-ZIP	DUNEDIN FL	64 CITY-ST-ZIP	Dunedin FL 34698

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: David J. Brien — David J. Brien — 3/31/95 — 813-734-9531
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — (Area Code & Phone #)

0060070