

FILED
Jun 10, 1999 8:00 am
Secretary of State

06-10-1999 90025 022 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS																																																																																																																																																	
DOCUMENT # 745691 1. Corporation Name BRAE MOOR ESTATES HOMEOWNERS ASSOCIATION, INC.																																																																																																																																																					
Principal Place of Business 1521 GLEN HOLLOW LN SO DUNEDIN FL 34698 US			Mailing Address 1521 GLEN HOLLOW LN SO DUNEDIN FL 34698 US																																																																																																																																																		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 01/24/1979 4. FEI Number 59-2895816 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees																																																																																																																																																	
9. Name and Address of Current Registered Agent CROSSMAN, ROBIN 1542 GLEN HOLLOW LANE N DUNEDIN FL 34698			10. Name and Address of New Registered Agent 81 Name Donna M. Parker 82 Street Address (P.O. Box Number is Not Acceptable) 1537 Glen Hollow Lane N. 83 City Dunedin FL 84 Zip Code 34698																																																																																																																																																		
11. Pursuant to the provisions of Sections 617.0502 and 617.1503, 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 Robin H. Crossman Donna M. Parker 4-21-99 (NOTE: Registered Agent signature required when registering)																																																																																																																																																					
12. OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE</td> <td>D</td> <td>☒ DELETE</td> </tr> <tr> <td>NAME</td> <td>BAYLISS, VICKI</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1958 BRAE MOOR DR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>DUNEDIN FL 34698</td> <td></td> </tr> <tr> <td>TITLE</td> <td>S</td> <td>☐ DELETE</td> </tr> <tr> <td>NAME</td> <td>MAHN, BETTY S</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1521 GLEN HOLLOW LN S3133C</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>DUNEDIN FL 34698</td> <td></td> </tr> <tr> <td>TITLE</td> <td>T</td> <td>☒ DELETE</td> </tr> <tr> <td>NAME</td> <td>CROSSMAN, ROBIN</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1542 GLEN HOLLOW LN N</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>DUNEDIN FL 34698</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td>☒ DELETE</td> </tr> <tr> <td>NAME</td> <td>PARKER, DONNA M</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1537 GLEN HOLLOW LN N</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>DUNEDIN FL</td> <td></td> </tr> <tr> <td>TITLE</td> <td>P</td> <td>☒ DELETE</td> </tr> <tr> <td>NAME</td> <td>LOEFFERT, SUE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1529 GLEN HOLLOW LN S</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>DUNEDIN FL</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td>☒ DELETE</td> </tr> <tr> <td>NAME</td> <td>STANLEY, ELLEN</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1585 BRAE MOOR DR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>DUNEDIN FL</td> <td></td> </tr> </table>			TITLE	D	☒ DELETE	NAME	BAYLISS, VICKI		STREET ADDRESS	1958 BRAE MOOR DR		CITY-ST-ZIP	DUNEDIN FL 34698		TITLE	S	☐ DELETE	NAME	MAHN, BETTY S		STREET ADDRESS	1521 GLEN HOLLOW LN S3133C		CITY-ST-ZIP	DUNEDIN FL 34698		TITLE	T	☒ DELETE	NAME	CROSSMAN, ROBIN		STREET ADDRESS	1542 GLEN HOLLOW LN N		CITY-ST-ZIP	DUNEDIN FL 34698		TITLE	D	☒ DELETE	NAME	PARKER, DONNA M		STREET ADDRESS	1537 GLEN HOLLOW LN N		CITY-ST-ZIP	DUNEDIN FL		TITLE	P	☒ DELETE	NAME	LOEFFERT, SUE		STREET ADDRESS	1529 GLEN HOLLOW LN S		CITY-ST-ZIP	DUNEDIN FL		TITLE	D	☒ DELETE	NAME	STANLEY, ELLEN		STREET ADDRESS	1585 BRAE MOOR DR		CITY-ST-ZIP	DUNEDIN FL		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <table border="1"> <tr> <td>1.1 TITLE</td> <td>Arlene Thibodeau</td> <td>☒ Change ☐ Addition</td> </tr> <tr> <td>1.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>1.3 STREET ADDRESS</td> <td>Bonnie Court, Dunedin, FL</td> <td></td> </tr> <tr> <td>1.4 CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>2.1 TITLE</td> <td>same</td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>2.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>2.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>2.4 CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>3.1 TITLE</td> <td>Donna M. Parker</td> <td>☒ Change ☐ Addition</td> </tr> <tr> <td>3.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>3.3 STREET ADDRESS</td> <td>1537 Glen Hollow Lane N.</td> <td></td> </tr> <tr> <td>3.4 CITY-ST-ZIP</td> <td>Dunedin, FL 34698</td> <td></td> </tr> <tr> <td>4.1 TITLE</td> <td>Will and BJ Davis</td> <td>☒ Change ☐ Addition</td> </tr> <tr> <td>4.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>4.3 STREET ADDRESS</td> <td>1998-Brae Moor Drive</td> <td></td> </tr> <tr> <td>4.4 CITY-ST-ZIP</td> <td>Dunedin, FL 34698</td> <td></td> </tr> <tr> <td>5.1 TITLE</td> <td>Cassie Millman</td> <td>☒ Change ☐ Addition</td> </tr> <tr> <td>5.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>5.3 STREET ADDRESS</td> <td>1986 Brae Moor Drive</td> <td></td> </tr> <tr> <td>5.4 CITY-ST-ZIP</td> <td>Dunedin, FL 34698</td> <td></td> </tr> <tr> <td>6.1 TITLE</td> <td>colleen Galfrey</td> <td>☒ Change ☐ Addition</td> </tr> <tr> <td>6.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>6.3 STREET ADDRESS</td> <td>1560</td> <td></td> </tr> <tr> <td>6.4 CITY-ST-ZIP</td> <td>Brae Moor Lane Dunedin FL 34698</td> <td></td> </tr> </table>			1.1 TITLE	Arlene Thibodeau	☒ Change ☐ Addition	1.2 NAME			1.3 STREET ADDRESS	Bonnie Court, Dunedin, FL		1.4 CITY-ST-ZIP			2.1 TITLE	same	☐ Change ☐ Addition	2.2 NAME			2.3 STREET ADDRESS			2.4 CITY-ST-ZIP			3.1 TITLE	Donna M. Parker	☒ Change ☐ Addition	3.2 NAME			3.3 STREET ADDRESS	1537 Glen Hollow Lane N.		3.4 CITY-ST-ZIP	Dunedin, FL 34698		4.1 TITLE	Will and BJ Davis	☒ Change ☐ Addition	4.2 NAME			4.3 STREET ADDRESS	1998-Brae Moor Drive		4.4 CITY-ST-ZIP	Dunedin, FL 34698		5.1 TITLE	Cassie Millman	☒ Change ☐ Addition	5.2 NAME			5.3 STREET ADDRESS	1986 Brae Moor Drive		5.4 CITY-ST-ZIP	Dunedin, FL 34698		6.1 TITLE	colleen Galfrey	☒ Change ☐ Addition	6.2 NAME			6.3 STREET ADDRESS	1560		6.4 CITY-ST-ZIP	Brae Moor Lane Dunedin FL 34698	
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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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robin Crossman
Donna M. Parker
DONNA M. PARKER

4-21-99 **127-733-0275**

6/25/99 **727-734-1072**

CR2E037 (11/98)