

2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Jan 27, 2006 08:00 AM
Secretary of State

DOCUMENT # 746673

1. Entity Name
BREEZY VILLAGE HOME OWNERS ASSOCIATION, INC.



Principal Place of Business
9600 96TH WAY
SEBASTIAN, FL 32958

Mailing Address
9600 96TH WAY
SEBASTIAN, FL 32958



01082006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-1999494

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ROMANO, JOSEPHINE
9735 61ST PKWY
SEBASTIAN, FL 32958

**DO NOT WRITE
IN THIS SPACE**

Josephine Romano

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Josephine Romano

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-24-06

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	TD
NAME	ROMANO, JOSEPHINE
STREET ADDRESS	9735 61ST PKWY
CITY-ST-ZIP	SEBASTIAN, FL 32958
TITLE	SD
NAME	VAN ALLEN, CAROLYN
STREET ADDRESS	9705 61ST PKWY
CITY-ST-ZIP	SEBASTIAN, FL 32958
TITLE	PD
NAME	MASSIE, BERNIE
STREET ADDRESS	3171 - 98TH PL
CITY-ST-ZIP	SEBASTIAN, FL 32958
TITLE	VD
NAME	WIBLE, ENID
STREET ADDRESS	9790 61ST PKWY
CITY-ST-ZIP	SEBASTIAN, FL 32958
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/06/06-80016-007 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Josephine Romano
ROMANO

1-24-06 772-589-0388

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #