

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # 747706 1. Entity Name BARDMOOR NORTH PROPERTY OWNERS' ASSOCIATION, INC.					
Principal Place of Business 10801 SARKEY RD., #104-52 SEMINOLE, FL 33777			Mailing Address 10801 STARKEY RD., #104-52 LARGO, FL 33777		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2876273	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
GACCIONE, PAUL 10801 STARKEY RD., #104-52 LARGO, FL 33777			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) DATE					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (IN 10)		
TITLE	V	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	WEBB, GLENDEL		NAME		
STREET ADDRESS	8205 BARDMOOR BLVD., #203		STREET ADDRESS		
CITY-ST-ZIP	LARGO, FL 33777		CITY-ST-ZIP		
TITLE	T	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	MILLIGAN, CHUCK		NAME		
STREET ADDRESS	10801 STARKEY RD #104-52		STREET ADDRESS		
CITY-ST-ZIP	LARGO, FL 33777		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	DILLON, DON		NAME		
STREET ADDRESS	8398 MEADOWBROOK DRIVE		STREET ADDRESS		
CITY-ST-ZIP	LARGO, FL 33777		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	HILL, RICHARD		NAME		
STREET ADDRESS	8398 MEADOWBROOK DRIVE		STREET ADDRESS		
CITY-ST-ZIP	LARGO, FL 33777		CITY-ST-ZIP		
TITLE	P	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	GACCIONE, PAUL		NAME		
STREET ADDRESS	10801 STARKEY RD #104-52		STREET ADDRESS		
CITY-ST-ZIP	LARGO, FL 33777		CITY-ST-ZIP		
TITLE	S	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	HOOVER, SANDY		NAME		
STREET ADDRESS	10801 STARKEY RD #104-52		STREET ADDRESS		
CITY-ST-ZIP	LARGO, FL 33777		CITY-ST-ZIP		
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 duly empowered.					
SIGNATURE:			03/10/06		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
Daytime Phone #					