

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 04, 2007 8:00 am
Secretary of State

06-04-2007 90012 045 ****61.25

DOCUMENT # 751520 1. Entity Name VILLAS ON POINT BRITTANY CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 5444 PARK BLVD # 101 PINELLAS PARK, FL 33781 US			Mailing Address P.O. BOX 47068 ST PETERSBURG, FL 33743-7068 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		05072007 Chg-NP CR2E037 (12/06)	
City & State		City & State		4. FEI Number 59-2152765	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WELTON, RONALD D 5444 PARK BLVD PINELLAS PARK, FL 33781				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 transferring.					
Filing Fee is \$61.25 Due by September 14, 2007		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 NAME STREET ADDRESS CITY-ST-ZIP	VPS DELLA PORTA, BARBARA 4970 BRITTANY DR. S. #6 SAINT PETERSBURG, FL 33715	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Goodale, Robert 4760 Brittany Dr. S. #19 St. Petersburg, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EPIFANIO, BEN 4770 BRITTANY DR S, # 118 SAINT PETERSBURG, FL 33715	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIEBNER, TOM 4760 BRITTANY DR SOUTH SUITE 20 SAINT PETERSBURG, FL 33715	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T EVANS, GEORGE 4740 BRITTANY DR. S. #130 SAINT PETERSBURG, FL 33715	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Cook, Diane 4750 Brittany Dr S #25 St. Petersburg, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LINDSTROM, BARBARA 4790 BRITTANY ST SOUTH #8 SAINT PETERSBURG, FL 33715	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Beneditti, Rick 4750 Brittany Dr. S #24 St. Petersburg, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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 life empowered.					
SIGNATURE: <i>Robert Goodale</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				5/9/07 727-381-1217 Date Secretary of State	