



2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90099 017 ****61.25

DOCUMENT # 751930 1. Entity Name BRAELOCH VILLAGE CONDOMINIUM ASSOCIATION, INC.																																																																																																																																																					
Principal Place of Business 3085BRAELOCH CIRCLE CLEARWATER, FL 33761 US				Mailing Address 3085BRAELOCH CIRCLE CLEARWATER, FL 33761 US																																																																																																																																																	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																																																																																																																																																			
City & State		City & State		01092007 Chg-NP CR2E037 (12/06)																																																																																																																																																	
Zip		Country		4. FEI Number 59-2015158																																																																																																																																																	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																																																																																																																																																			
6. Name and Address of Current Registered Agent MALOY, FREDERICK 3085 BRAELOCH CIRCLE CLEARWATER, FL 33761			7. Name and Address of New Registered Agent 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																																																					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																																																																																	
Make check payable to Florida Department of State																																																																																																																																																					
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">PD</td> <td style="width: 10%; text-align: center;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>HYNTER, ERWIN</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3055 BRAELOCH CIR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CLEARWATER, FL 33761</td> <td></td> </tr> <tr> <td>TITLE</td> <td>SD</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>GOLDSTEIN, KENNETH</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3083 BRAELOCH CIRCLE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CLEARWATER, FL 33761</td> <td></td> </tr> <tr> <td>TITLE</td> <td>T</td> <td style="text-align: center;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>MALOY, FRED</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3085 BRAELOCH CIR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CLEARWATER, FL 33761</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>RUSSELL, PATTY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3067 BRAE LOCH CIRCLE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CLEARWATER, FL 33761</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: center;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>LAWN, MICHAEL</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3043 BRAELOCH CIR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CLEARWATER, FL 33761</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">PD</td> <td style="width: 10%; text-align: center;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>MALOY, FRED</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3085 BRAELOCH CIRCLE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CLEARWATER, FL 33761</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>TD</td> <td style="text-align: center;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>MALOY, FRED</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3085 BRAELOCH CIRCLE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CLEARWATER, FL 33761</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: center;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>SILAR, JAY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3081 BRAELOCH CIRCLE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CLEARWATER, FL 33761</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	PD	<input checked="" type="checkbox"/> Delete	NAME	HYNTER, ERWIN		STREET ADDRESS	3055 BRAELOCH CIR		CITY-ST-ZIP	CLEARWATER, FL 33761		TITLE	SD	<input type="checkbox"/> Delete	NAME	GOLDSTEIN, KENNETH		STREET ADDRESS	3083 BRAELOCH CIRCLE		CITY-ST-ZIP	CLEARWATER, FL 33761		TITLE	T	<input checked="" type="checkbox"/> Delete	NAME	MALOY, FRED		STREET ADDRESS	3085 BRAELOCH CIR		CITY-ST-ZIP	CLEARWATER, FL 33761		TITLE	D	<input type="checkbox"/> Delete	NAME	RUSSELL, PATTY		STREET ADDRESS	3067 BRAE LOCH CIRCLE		CITY-ST-ZIP	CLEARWATER, FL 33761		TITLE	D	<input checked="" type="checkbox"/> Delete	NAME	LAWN, MICHAEL		STREET ADDRESS	3043 BRAELOCH CIR		CITY-ST-ZIP	CLEARWATER, FL 33761		TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	MALOY, FRED		STREET ADDRESS	3085 BRAELOCH CIRCLE		CITY-ST-ZIP	CLEARWATER, FL 33761		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	MALOY, FRED		STREET ADDRESS	3085 BRAELOCH CIRCLE		CITY-ST-ZIP	CLEARWATER, FL 33761		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	SILAR, JAY		STREET ADDRESS	3081 BRAELOCH CIRCLE		CITY-ST-ZIP	CLEARWATER, FL 33761		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE	PD	<input checked="" type="checkbox"/> Delete																																																																																																																																																			
NAME	HYNTER, ERWIN																																																																																																																																																				
STREET ADDRESS	3055 BRAELOCH CIR																																																																																																																																																				
CITY-ST-ZIP	CLEARWATER, FL 33761																																																																																																																																																				
TITLE	SD	<input type="checkbox"/> Delete																																																																																																																																																			
NAME	GOLDSTEIN, KENNETH																																																																																																																																																				
STREET ADDRESS	3083 BRAELOCH CIRCLE																																																																																																																																																				
CITY-ST-ZIP	CLEARWATER, FL 33761																																																																																																																																																				
TITLE	T	<input checked="" type="checkbox"/> Delete																																																																																																																																																			
NAME	MALOY, FRED																																																																																																																																																				
STREET ADDRESS	3085 BRAELOCH CIR																																																																																																																																																				
CITY-ST-ZIP	CLEARWATER, FL 33761																																																																																																																																																				
TITLE	D	<input type="checkbox"/> Delete																																																																																																																																																			
NAME	RUSSELL, PATTY																																																																																																																																																				
STREET ADDRESS	3067 BRAE LOCH CIRCLE																																																																																																																																																				
CITY-ST-ZIP	CLEARWATER, FL 33761																																																																																																																																																				
TITLE	D	<input checked="" type="checkbox"/> Delete																																																																																																																																																			
NAME	LAWN, MICHAEL																																																																																																																																																				
STREET ADDRESS	3043 BRAELOCH CIR																																																																																																																																																				
CITY-ST-ZIP	CLEARWATER, FL 33761																																																																																																																																																				
TITLE		<input type="checkbox"/> Delete																																																																																																																																																			
NAME																																																																																																																																																					
STREET ADDRESS																																																																																																																																																					
CITY-ST-ZIP																																																																																																																																																					
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																																																			
NAME	MALOY, FRED																																																																																																																																																				
STREET ADDRESS	3085 BRAELOCH CIRCLE																																																																																																																																																				
CITY-ST-ZIP	CLEARWATER, FL 33761																																																																																																																																																				
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																																																			
NAME																																																																																																																																																					
STREET ADDRESS																																																																																																																																																					
CITY-ST-ZIP																																																																																																																																																					
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																																																			
NAME	MALOY, FRED																																																																																																																																																				
STREET ADDRESS	3085 BRAELOCH CIRCLE																																																																																																																																																				
CITY-ST-ZIP	CLEARWATER, FL 33761																																																																																																																																																				
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																																																			
NAME																																																																																																																																																					
STREET ADDRESS																																																																																																																																																					
CITY-ST-ZIP																																																																																																																																																					
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																																																			
NAME	SILAR, JAY																																																																																																																																																				
STREET ADDRESS	3081 BRAELOCH CIRCLE																																																																																																																																																				
CITY-ST-ZIP	CLEARWATER, FL 33761																																																																																																																																																				
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																																																			
NAME																																																																																																																																																					
STREET ADDRESS																																																																																																																																																					
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 like empowered.																																																																																																																																																					
SIGNATURE: <u>Frederick L Maloy</u> 4/6/07 727.796.8402																																																																																																																																																					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																																																					