

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2005 8:00 am
Secretary of State

02-08-2005 90015 028 ****61.25

DOCUMENT # 752366

1. Entity Name

BOTTLEBRUSH HOME OWNERS ASSOCIATION, INC.



Principal Place of Business

P.O. BOX 7403
DELRAY BEACH FL 33482-7403

Mailing Address

P.O. BOX 7403
DELRAY BEACH FL 33482-7403
US

00011373

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

59-2022075

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BENDER, RICHARD
15729 BOTTLE BRUSH CIRCLE
DELRAY BEACH FL 33484

7. Name and Address of New Registered Agent

Name VINCENT FERRARIE

Street Address (P.O. Box Number is Not Acceptable)

15644 BOTTLEBRUSH CIR.

City DELRAY BEACH FL Zip Code 33484

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

Vincent Ferrarie VINCENT FERRARIE PRESIDENT 2/1/05

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	BENDER, RICHARD	
STREET ADDRESS	15729 BOTTLEBRUSH CIRCLE	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	GALLANTY, BARBARA	
STREET ADDRESS	15729 BOTTLEBRUSH CIRCLE	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE	II GROUNDS	<input type="checkbox"/> Delete
NAME	MILLER, HARRY L	
STREET ADDRESS	5054 BOTTLEBRUSH ST	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	FERRARIE, VINCENT	
STREET ADDRESS	15644 BOTTLEBRUSH CIRCLE	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE	VICE PRES.	<input type="checkbox"/> Delete
NAME	GOLDSTEIN, BERT	
STREET ADDRESS	15616 BOTTLE BRUSH CIRCLE	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VINCENT FERRARIE	
STREET ADDRESS	15644 BOTTLEBRUSH CIR.	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE	TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERT OSTRANDER	
STREET ADDRESS	15591 BOTTLEBRUSH CIR.	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALICE AUDETTE	
STREET ADDRESS	5088 BOTTLEBRUSH STREET	
CITY-ST-ZIP	DELRAY BEACH FL 33484	
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 exemption stated in Section 119.07(3)(i), 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

Vincent Ferrarie VINCENT FERRARIE 2/1/05 561 865 0517

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #