

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 06, 2006 8:00 am
Secretary of State

06-06-2006 90014 008 ****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

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

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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW: 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

TITLE **P** ☒ Delete
NAME **FERRARIE, VINCENT**
STREET ADDRESS **15644 BOTTLE BRUSH CIR**
CITY-ST-ZIP **DELRAY BEACH FL 33484**

TITLE **T** ☒ Delete
NAME **OSTRANDER, ROBERT**
STREET ADDRESS **15591 BOTTLE BRUSH CIR**
CITY-ST-ZIP **DELRAY BEACH FL 33484**

TITLE **TD** ☒ Delete
NAME **MILLER, HARRY L**
STREET ADDRESS **5054 BOTTLEBRUSH ST**
CITY-ST-ZIP **DELRAY BEACH FL 33484**

TITLE **S** ☒ Delete
NAME **AUDETTE, ALICE**
STREET ADDRESS **5088 BOTTLE BRUSH STREET**
CITY-ST-ZIP **DELRAY BEACH FL 33484**

TITLE **D** ☒ Delete
NAME **GOLDSTEIN, BERT**
STREET ADDRESS **15616 BOTTLE BRUSH CIRCLE**
CITY-ST-ZIP **DELRAY BEACH FL 33484**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PRESIDENT** ☒ Change ☐ Addition
NAME **ROBERT J OSTRANDER**
STREET ADDRESS **15591 BOTTLEBRUSH CIRCLE**
CITY-ST-ZIP **DELRAY BEACH, FL 33484**

TITLE **VICE PRESIDENT** ☒ Change ☐ Addition
NAME **BERT GOLDSTEIN**
STREET ADDRESS **15616 BOTTLEBRUSH CIRCLE**
CITY-ST-ZIP **DELRAY BEACH, FL 33484**

TITLE **SECRETARY** ☒ Change ☐ Addition
NAME **DEBORAH DENNIS**
STREET ADDRESS **15684 BOTTLEBRUSH CIRCLE**
CITY-ST-ZIP **DELRAY BEACH, FL 33484**

TITLE **TREASURER** ☒ Change ☐ Addition
NAME **ARLENE R MILLER**
STREET ADDRESS **5054 BOTTLEBRUSH ST**
CITY-ST-ZIP **DELRAY BEACH, FL 33484**

TITLE **MAINTENANCE DIRECTOR** ☒ Change ☐ Addition
NAME **KURT WEIL**
STREET ADDRESS **15736 BOTTLEBRUSH CIRCLE**
CITY-ST-ZIP **DELRAY BEACH, FL 33484**

TITLE ☐ Change ☐ 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 Section 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:

Robert J Ostrander

5/30/06

561-496-2457