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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 756349

1. Corporation Name

BRITTANY TERRACE OWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
170 LAKE STELLA DRIVE #14 AUBURNDALE FL 33823	170 LAKE STELLA DRIVE #14 AUBURNDALE FL 33823

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 02/12/1981
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-6807264 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing ☐ Trust Fund Contribution $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

~~AMMANN, CHRISTOPHER~~
~~170 LAKE STELLA DR~~
~~#13~~
~~AUBURNDALE FL 33823~~

10. Name and Address of New Registered Agent

81 Name: BOGGS, DALE C
82 Street Address (P.O. Box Number is Not Acceptable): 170 Lake Stella Dr #2
83
84 City: Auburndale FL 85 Zip Code: 33823

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Dale C. Boggs, Pres. DALE C. BOGGS, PRES. DATE: 4-5-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☒ DELETE	1.1 TITLE	DP	☒ Change ☐ Addition
NAME	~~AMMANN, CHRISTOPHER~~		1.2 NAME	BOGGS, DALE C.	
STREET ADDRESS	170 LAKE STELLA DR, #13		1.3 STREET ADDRESS	170 LAKE STELLA DR. #2	
CITY-ST-ZIP	AUBURNDALE FL 33823		1.4 CITY-ST-ZIP	AUBURNDALE, FL 33823	
TITLE	ST	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	MASTERS, NORMA		2.2 NAME	SAME	
STREET ADDRESS	170 LAKE STELL DR #12		2.3 STREET ADDRESS		
CITY-ST-ZIP	AUBURNDALE, FL 00000		2.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	3.1 TITLE	CHRISTIAN, CECIL	☒ Change ☐ Addition
NAME	~~TEDDER, JIM~~		3.2 NAME		
STREET ADDRESS	170 LAKE STELLA DR, #3		3.3 STREET ADDRESS	170 Lake Stella Dr #13	
CITY-ST-ZIP	AUBURNDALE FL 33823		3.4 CITY-ST-ZIP	Auburndale FL 33823	
TITLE	D	☐ DELETE	4.1 TITLE		☒ Change ☐ Addition
NAME	READ, JOHNNY M JR		4.2 NAME	READ, JOHNNY M JR	
STREET ADDRESS	~~1539 AUBURN OAKS CIR~~		4.3 STREET ADDRESS	170 LAKE STELLA DR # 11	
CITY-ST-ZIP	AUBURNDALE FL 33823		4.4 CITY-ST-ZIP	AUBURNDALE, FL 33823	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (11/98)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 3/8/99 941-397-1680
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
NORMA MASTERS