

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 19 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morton Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **756898** (3)
1. Corporation Name
BERKELEY HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 1301 SEMINOLE BLVD. SUITE 172 LARGO FL 34640 US	Mailing Address 1301 SEMINOLE BLVD. SUITE 172 LARGO FL 34640 US
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3. Date Incorporated or Qualified 03/24/1981	
4. FEI Number 59-3040591	Applied For ☐ Not Applicable

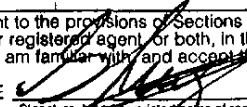
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent EMERSON, EDWARD K. GAIC KNIGHT 2112 US HWY. 41 SW. RUSKIN FL 33570	
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10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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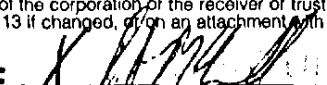
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	VTD ☒ DELETE
NAME	LEACH, JANE
STREET ADDRESS	102 TARGA CT
CITY-ST-ZIP	TAMPA FL
TITLE	PD ☒ DELETE
NAME	MCCONNELL, BOB
STREET ADDRESS	102 BISCAYNE
CITY-ST-ZIP	TAMPA FL
TITLE	SD ☒ DELETE
NAME	HINANT, LAURA
STREET ADDRESS	118 TARGA
CITY-ST-ZIP	TAMPA FL
TITLE	SD ☒ DELETE
NAME	DAILY, DENISE
STREET ADDRESS	106 TARGA CT
CITY-ST-ZIP	TAMPA FL
TITLE	PD ☒ DELETE
NAME	HERMAN, PATRICK
STREET ADDRESS	106 TARGA CT
CITY-ST-ZIP	TAMPA FL
TITLE	VTD ☐ DELETE
NAME	GARRETT, GARY
STREET ADDRESS	100-A BISCAYNE
CITY-ST-ZIP	TAMPA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☒ Addition
1.2 NAME	D. HARRIS, DEBBIE
1.3 STREET ADDRESS	100 B BISCAYNE
1.4 CITY-ST-ZIP	TAMPA FL
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

SIGNATURE:  JAN 18 98 7546008

CR2E037 (1097)