2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Mar 31, 2004 8:00 am **Secretary of State DOCUMENT # 760919** 02-26-2004 90015 042 *****5.00 03-31-2004 90001 015 ****56.25 BRIAR CREEK SOCIAL CLUB COMMUNITY NO. 2, INC. Principal Place of Business Mailing Address 54024251 175 CLUBVIEW DR 153 CLUBVIEW DDR SAFETY HARBOR FL 34695 US SAFETY HARBOR FL 34695 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #. etc. CR2E037 (11/03) City & State Applied For City & State 4. FEI Number 59-2121723 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired **Fee Required** 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Bowllou SMITLEY, CAROL A Street Address (P.O. Box Number is Not Acceptable) 144 BRIAR CREEK BLVD SAFETY HARBOR FL 34695 City Zip Code 34695 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. Marsha Bowllou SIGNATURE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 7. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Smitley, Carol TITLE ☐ Delete TITLE **⊠** Change SMITLEY, CARO NAME NAME 144 Brist Creek Blud 144 BRIAR CREEK BLVD STREET ADDRESS STREET ADDRESS Safedyldarbor, \$1 34695 SAFETY HARBOR FL 34695 CITY-ST-ZIP CITY-ST-ZIP DPE o P M Change Addition ☐ Delete O'CONNOR, ED o'conner, Ed NAME NAME 137 PINEWOOD TER STREET ADDRESS STREET ADDRESS 137 Pine wood Ter Sofety Harton F1 3 SAFETY HARBOR FL 34695 COY-ST-7P CITY-ST-7IP ☐ Change **Addition** TITE F 🗹 Delete TITLE LAMBERT, ARLENE " NAME Withing miarile NAME 90 NATURES TRAIL STREET ADDRESS STREET ADDRESS 30 Sunrise Ch SAFETY-HARBOR FL 34695 CITY-ST-ZIP Safety Horrow, CITY - ST-ZIF 34695 61 DCS **⊠** Delete TITLE DCS ☐ Change Addition SOLLINGER, DOT NAME Beyer, Darlene NAME 88 LAURELWOOD DR STREET ADDRESS STREET ADDRESS 183 Chanview Dr. SAFETY HARBOR FL 34695 CITY-ST-76 CITY-ST-ZIP Surely Harbor. F1 34695 TITLE ☐ Change **Addition** ☐ Delete TITLE BOWLEY, MARSHA NAME NAME Cann. Sharon 153 CLUBVIEW 33 Sumpise Ct STREET ADORESS STREET ADDRESS SAFETY HARBOR FL 34695 CITY-ST-ZIP Safety Harbor. CITY-ST-ZIE ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C/TY-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. 2-18.04 727-724-9406

INTED HAME OF SIGNING OFFICER ON DISECTOR

FILED