

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 761186 (6)  
1. Corporation Name  
BRANDY CHASE VILLAGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business  
45 BRANDY CHASE BLVD.  
WINTER HAVEN FL 33880  
US

Mailing Address  
45 BRANDY CHASE BLVD.  
WINTER HAVEN FL 33880  
US

3. Date Incorporated or Qualified  
12/21/1981

3a. Date of Last Report  
02/09/1995

4. FEI Number  
59-2412330

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

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

9. Name and Address of Current Registered Agent  
KIRCHLER, LOUIS  
38 KIMBERLY COURT SW  
WINTER HAVEN FL 33880

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KENWORTHY, JAMES 27 KIMBERLY COURT SW WINTER HAVEN FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	TD Goodrich, Reginald 37 Kimberly Ct. Winter Haven, Fl. 33880
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CARRELL, MARY 11 KENDRA COURT SW WINTER HAVEN FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LEMONDS, MANUELINE 42 KIMBERLY COURT SW WINTER HAVEN FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	S Sweeney, Shirley 41 Kimberly Ct. Winter Haven, Fl. 33880
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ENSELL, JACK 22 KENDRA COURT SW WINTER HAVEN FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	D Lucas, Robert 21 Kendra Ct. Winter Haven, Fl. 33880
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KIRCHLER, LOUIS 39 KIMBERLY COURT SW WINTER HAVEN FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	D Kirchler, Louis 39 Kimberly Ct. Winter Haven, Fl. 33880
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ENSELL, JACK 22 KENDRA COURT SW WINTER HAVEN FL	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: John W Ensell  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb. 27, 1996 941-294-3837  
Date Daytime Phone #

CR2E037 (12/95)