

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 19 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA 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

Mailing Address

**45 BRANDY CHASE BLVD.
WINTER HAVEN FL 33880
US****45 BRANDY CHASE BLVD.
WINTER HAVEN FL 33880-7153
US**3. Date Incorporated or Qualified **12/21/1981** 3a. Date of Last Report **02/27/1996**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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KIRCHLER, LOUIS
38 KIMBERLY COURT SW
WINTER HAVEN FL 33880**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **TD** ☐ DELETE
NAME **GOODRICH, REGINALD**
STREET ADDRESS **37 KIMBERLY COURT**
CITY - ST - ZIP **WINTER HAVEN FL**TITLE **VD** ☐ DELETE
NAME **CARRELL, MARY**
STREET ADDRESS **11 KENDRA COURT SW**
CITY - ST - ZIP **WINTER HAVEN FL**TITLE **S** ☐ DELETE
NAME **SWEENEY, SHIRLEY**
STREET ADDRESS **41 KIMBERLY COURT**
CITY - ST - ZIP **WINTER HAVEN FL**TITLE **D** ☐ DELETE
NAME **LUCAS, ROBERT**
STREET ADDRESS **21 KENDRA COURT**
CITY - ST - ZIP **WINTER HAVEN FL**TITLE **D** ☐ DELETE
NAME **KIRCHLER, LOUIS**
STREET ADDRESS **39 KIMBERLY COURT**
CITY - ST - ZIP **WINTER HAVEN FL**TITLE **PD** ☒ DELETE
NAME **ENSELL, JACK**
STREET ADDRESS **22 KENDRA COURT SW**
CITY - ST - ZIP **WINTER HAVEN FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP6.1 TITLE ☒ Change ☐ Addition
6.2 NAME **PD**
6.3 STREET ADDRESS **James Richardson**
6.4 CITY - ST - ZIP **40 Kimberly Ct, Winter Haven, FL 33880**

14. I do 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:

James Richardson**2-13-97****941-293-3526**

CR2E037 (9/96)