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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **765426** **(2)**

1. Corporation Name

BRYN MAWR SOUTH HOMEOWNERS ASSOCIATION UNIT #3 A ND #7, INC.

Principal Place of Business	Mailing Address
3149 BRIDGEHAMPTON LN. ORLANDO FL 32812	3149 BRIDGEHAMPTON LN. ORLANDO FL 32812-5946

3. Date Incorporated or Qualified: 10/18/1982
3a. Date of Last Report: 03/11/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 59-2402610 ☐ 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

9. Name and Address of Current Registered Agent

HALL, SUSAN E.
3149 BRIDGEHAMPTON LN.
ORLANDO FL 32812

10. Name and Address of New Registered Agent

81 Name: Bryan Scott Thompson
82 Street Address (P.O. Box Number Is Not Acceptable): 3506 Exeter Court
83
84 City: Orlando, FL 85 Zip Code: 32812

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: Bryan Scott Thompson — 3/28/97
Signature, type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE	Director	☒ Change ☐ Addition
NAME	HALL, SUSAN E.		1.2 NAME	Susan E. Hall, "D"	
STREET ADDRESS	3024 GOLDENVIEW LANE		1.3 STREET ADDRESS	3024 Goldenview Lane	
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP	~~Orlando, Fl. 32812~~	
TITLE	VPD	☒ DELETE	2.1 TITLE	President	☒ Change ☐ Addition
NAME	THOMSPON, SCOTT		2.2 NAME	Bryan Scott Thompson, "D"	
STREET ADDRESS	3506 EXETER COURT		2.3 STREET ADDRESS	3506 Exeter Court	
CITY-ST-ZIP	ORLANDO FL		2.4 CITY-ST-ZIP	~~Orlando, Fl. 32812~~	
TITLE	SD	☒ DELETE	3.1 TITLE	Director	☐ Change ☒ Addition
NAME	HEUSTED, DAVID A.		3.2 NAME	Joyce G. Cochran, "D"	
STREET ADDRESS	3044 GOLDENVIEW LANE		3.3 STREET ADDRESS	2990 Bridgehampton Lane	
CITY-ST-ZIP	ORLANDO FL		3.4 CITY-ST-ZIP	~~Orlando, Fl. 32812~~	
TITLE	TD	☒ DELETE	4.1 TITLE	Treasurer	☐ Change ☐ Addition
NAME	SANTANA, ROBERT		4.2 NAME	Robert Santana, "D"	
STREET ADDRESS	3517 EXETER COURT		4.3 STREET ADDRESS	3517 Exeter Court	
CITY-ST-ZIP	ORLANDO FL		4.4 CITY-ST-ZIP	~~Orlando, Fl. 32812~~	
TITLE	D	☒ DELETE	5.1 TITLE	Vice-President	☐ Change ☒ Addition
NAME	DESIN, GINA		5.2 NAME	Cathy Kravchuk, "D"	
STREET ADDRESS	3084 GOLDEN VIEW LANE		5.3 STREET ADDRESS	3099 Bridgehampton Lane	
CITY-ST-ZIP	ORLANDO FL		5.4 CITY-ST-ZIP	~~Orlando, Fl. 32812~~	
TITLE	D	☒ DELETE	6.1 TITLE	Secretary	☒ Change ☐ Addition
NAME	WIBERG, ERIK		6.2 NAME	Erik Wiberg, "D"	
STREET ADDRESS	3519 EXETER COURT		6.3 STREET ADDRESS	3519 Exeter Court	
CITY-ST-ZIP	ORLANDO FL		6.4 CITY-ST-ZIP	Orlando, Fl. 32812	

CR2E037 (9/96)

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: Bryan Scott Thompson REQUIRED — 3/28/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0017243