

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 01, 2007 8:00 am
Secretary of State

02-01-2007 90020 005 ****61.25

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1. Entity Name

THE CHASE AT BARDMOOR ASSOCIATION, INC.



Principal Place of Business

8640 PIPER LANE
LARGO FL 33777

Mailing Address

8640 PIPER LANE
LARGO FL 33777

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2552095

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

OWEN, JAMES J
10621 ANDREW LN
LARGO FL 33777

7. Name and Address of New Registered Agent

Name **BILL MCGAVREN**

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

10601 ANDREW LANE

City **LARGO**

FL

Zip Code

33777

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.

SIGNATURE

BILL MCGAVREN *Bill McGavren*

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

(NOTE: Registered Agent signature required when registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	☒ Delete
NAME	MCCRORY, CAROL	
STREET ADDRESS	8611 PIPER LN	
CITY-ST-ZIP	LARGO FL 33777	
TITLE	S	☒ Delete
NAME	HARE, ELAINE	
STREET ADDRESS	10628 ANDREW LN	
CITY-ST-ZIP	LARGO FL 33777	
TITLE	S	☒ Delete
NAME	MCCRORY, CAROL	
STREET ADDRESS	8611 PIPER LANE	
CITY-ST-ZIP	LARGO FL 33777	
TITLE	P	☒ Delete
NAME	CAWTHON, TOM	
STREET ADDRESS	10617 ANDREW LN	
CITY-ST-ZIP	LARGO FL 33777	
TITLE	VP	☐ Delete
NAME	MCGAVREN, BILL	
STREET ADDRESS	10601 ANDREW LN	
CITY-ST-ZIP	LARGO FL 33777	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VICE-PRESIDENT	☐ Change ☒ Addition
NAME	NANCY BRATTI	
STREET ADDRESS	10630 ANDREW LANE	
CITY-ST-ZIP	LARGO, FL. 33777	
TITLE	SECRETARY	☐ Change ☒ Addition
NAME	MARILEE FRIEDMAN	
STREET ADDRESS	10612 ANDREW LANE	
CITY-ST-ZIP	LARGO FL. 33777	
TITLE	TREASURER	☐ Change ☒ Addition
NAME	ANN STEWART	
STREET ADDRESS	8677 PIPER LANE	
CITY-ST-ZIP	LARGO, FL. 33777	
TITLE	DIRECTOR AT LARGE	☐ Change ☒ Addition
NAME	RAY PINGALORE	
STREET ADDRESS	10603 ANDREW LANE	
CITY-ST-ZIP	LARGO, FL. 33777	
TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	BILL MCGAVREN	
STREET ADDRESS	10601 ANDREW LANE	
CITY-ST-ZIP	LARGO, FL. 33777	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE:

Bill McGavren

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #