

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 30, 2004 8:00 am**  
**Secretary of State**

06-30-2004 90001 005 \*\*\*\*61.25

<b>DOCUMENT # N01000005269</b>													
<b>1. Entity Name</b> BRANCH RANCH HOMEOWNERS ASSOCIATION, INC.													
<b>Principal Place of Business</b> 6129 OLD PASCO ROAD WESLEY CHAPEL, FL 33544			<b>Mailing Address</b> 6129 OLD PASCO ROAD WESLEY CHAPEL, FL 33544										
<b>2. Principal Place of Business</b> 8811 S.R. 52		<b>3. Mailing Address</b> P.O. Box 138											
Suite, Apt. #, etc. 18		Suite, Apt. #, etc.											
<b>City &amp; State</b> Hudson FL		<b>City &amp; State</b> Land O' Lakes FL		<b>4. FEI Number</b> 46-0505145									
<b>Zip</b> 34674		<b>Country</b> Pasco		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>									
<b>6. Name and Address of Current Registered Agent</b> COZZO, MARGARET 6129 OLD PASCO ROAD WESLEY CHAPEL, FL 33544		<b>7. Name and Address of New Registered Agent</b> Name: John L. Nugent, Jr. Street Address (P.O. Box Number is Not Acceptable): 8811 S.R. 52 Suite 18 City: Hudson FL Zip Code: 34674											
<b>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.</b>													
SIGNATURE: <small>Signature, typed or printed name of registered agent and title if applicable.</small>		John L. Nugent, Jr. 06/23/04 <small>(NOTE: Registered Agent signature required when re-registering)</small> DATE											
<b>Filing Fee is \$61.25</b> <b>Due by September 8, 2004</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>									
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>											
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**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.**

**SIGNATURE:** John L. Nugent, Jr. 06/23/04 (727) 868-3374  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #