

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005969

FILED  
Apr 29, 2010  
Secretary of State

**Entity Name:** BARRINGTON HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

BARRINGTON OAKS  
DOVER, FL 33527

**New Principal Place of Business:**

1207 N HIMES AVE  
SUITE 3  
TAMPA, FL 33607

**Current Mailing Address:**

1207 N. HIMES AVE.  
SUITE 3  
TAMPA, FL 33607

**New Mailing Address:**

**FEI Number:** 01-0604383      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

UNIQUE PROPERTY SERVICES INC.  
1207 N. HIMES AVE,  
SUITE 3  
TAMPA, FL 33607 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SKOLNIK, NANNETTE  
Address: 7110 MUCK POND ROAD  
City-St-Zip: DOVER, FL 33527

Title: VD  
Name: JACOB, DENNY  
Address: 9206 BARRINGTON OAKS  
City-St-Zip: DOVER, FL 33527

Title: TSD  
Name: ZEIGLER, BRENDA  
Address: 9303 BARRINGTON OAKS  
City-St-Zip: DOVER, FL 33527

Title: D  
Name: MCGIMPSEY, MICHAEL  
Address: 9426 BARRINGTON OAKS  
City-St-Zip: DOVER, FL 33527

Title: D  
Name: MENTOR, JACKIE  
Address: 9310 BARRINGTON OAKS  
City-St-Zip: DOVER, FL 33527

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: NANNETTE SKOLNIK

PD

04/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date