

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 21, 2005 8:00 am
Secretary of State

03-21-2005 90127 004 ****61.25

DOCUMENT # N02000006624

1. Entity Name
BRADENTON VILLAGE HOMEOWNERSHIP, INC.



Principal Place of Business
1307 6TH STREET WEST
BRADENTON, FL 34205

Mailing Address
1307 6TH STREET WEST
BRADENTON, FL 34205

50029847



01242005 No Chg-NP

CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
51-0425506

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCGUIRE, HUGH E JR.
1401 MANATEE AVENUE WEST
SUITE 1200
BRADENTON, FL 34205

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IN THIS SPACE**

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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME DESUE, WILLIAM B SR
STREET ADDRESS 1307 6TH STREET WEST
CITY-ST-ZIP BRADENTON, FL 34205

TITLE D
NAME CLAYTON, LANCE
STREET ADDRESS 1307 6TH STREET WEST
CITY-ST-ZIP BRADENTON, FL 34205

TITLE D
NAME ROBERSON, MICHAEL
STREET ADDRESS 1307 6TH STREET WEST
CITY-ST-ZIP BRADENTON, FL 34205

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Daytime Phone # _____