1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N26834

1. Corporation Name

BROADTREE HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	
6492 BROADTREE COURT. TALLAHASSEE FL 32311	-
US	

2. Principal Place of Business

21

Mailing Address

2a. Mailing Address

C/O CHRISTOPHER D. WHITE 6492 BROADTREE COURT TALLAHASSEE FL 32311

26

FILED May 10, 1999 8:00 am § Secretary of State

05-10-1999 90041 045 ****61.25



3. Date Incorporated or Qualifed

06/07/1988

Suite, Apt.	Apt. #, etc. Suite, Apt. #, etc.				4. FEI Number	Apr	Applied For	
22	27				NOT APPLICABLE	Not	t Applicable	
City & Stat	е	City & State			5. Certifcate of Status Desired	\$8.75 A		
23		28			o. Certificate of Status Desired	Fee Red	quired	
Zip	Country	Zip	Country		6. Election Campaign Financing	\$5.00	May Be	
24	25	29 30	1		Trust Fund Contribution	Added to	o Fees	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	l Agent		
			81	Name			•	
TUOMPOON CHOAN C			82	Stroet Add	fress (P.O. Box Number is Not Acceptable)			
THOMPSON, SUSAN S.			62	Silect Auc	iless (1 .O. dox Haijibor to Hot / toophasto)		· · ·	
3520 THOMASVILLE ROAD TALLAHASSEE FL 32308			83					
IALLAMAS	SSEE FL 32300					[a=] =:- c		
. ' 2 . 12 .	• Company of the comp		84	City	Fi	85 Zip C	,ode	
44 0	to the provisions of Sections 617 0502	2 and 617 1508 Florida Statutes.	the above	-named cor	poration submits this statement for the numose 0	of changing its	registered	
office or r	egistered agent or both in the State (of Florida. Such change was auth	orized by	tne corporat	ion's board of directors. I hereby accept the appo	ointment as rec	jistered	
agent. I a	m familiar with, and accept the obligat	ions of, Section 617.0503, Florida	s Statutes.				{	
SIGNATURE	Signature, typed or printed name of registered agen	A cod title if continued (NOTE: Po	nictored Anon	t cianature remui	red when reinstating) DATE		——	
12.	Signature, typed or printed name of registered agent		13.	t algitatione rodges	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12	
TITLE	PD	DELETE	1.1 TITLE	P		Change	Addition	
NAME	WHITE, CHRISTOPHER	Manage	1.2 NAME	0	ick Feldman		^	
	6492 BROADTREE COURT		1.3 STREET	ADORESS A	477 Broad tree C+			
STREET ADDRESS CITY-ST-ZIP	TALLAHASSEE FL		1.4 CITY-ST	7.7IP	ALLAHASSEE, FL 32311			
TITLE	SD	DELETE	2.1 TITLE	V	D	☐ Change	Addition	
NAME	WHITE, SALLY TIGER	•	2.2 NAME	R	OBERT BLANTON 484 Broadfree Ct		·	
STREET ADDRESS	6492 BROADTREE COURT		2.3 STREET	ADDRESS 6	484 Broadtree Ct			
CITY-ST-ZIP	TALLAHASSEE FL	^	2.4 CITY-S	T-ZIP	ALLAHASSEE, FL 32311			
TITLE	VD	X DELETE	3.1 TITLE		D	Change	Addition	
NAME	WISSINGER, RON	·	3.2 NAME	L	15A Rhoden		,	
STREET ADDRESS	6888 GLEN MEADOW LANE		3.3 STREET	ADDRESS 6	47 & Broadtree Ct			
CITY-ST-ZIP	TALLAHASSEE FL		3.4. CITY-S	T-ZIP	ALLAHASS 22 PL 32311			
πιε	TD	(X)ELETE	4.1 TITLE	کر	D	Change	Addition	
NAME	NISHIMOTO, JANA		4. 2 NAME	$\int f$	Brenda Johnson 1455 Browlfree Ct 1211shassee, FL 32311		ļ	
STREET ADDRESS	6480 BROADTREE COURT		4.3 STREET	ADDRESS (485 Brockfree CF		,	
CITY-ST-ZIP	TALLAHASSEE FL		4.4 CITY-S	r-ZIP	Tellahassee, LL 32311			
πιLE		DELETE	5.1 TITLE			Change	☐ Addition	
NAME			5.2 NAME				İ	
STREET ADDRESS			5.3 STREET	ADDRESS				
Cfty-St-ZIP			5.4 CITY-S	r-ZtP				
TITLE		☐ DELETE	6.1 TITLE			Change	Addition	
NAME	į		6.2 NAME					
STREET ADDRESS	1		6.3 STREET	ADDRESS				
l	1		6.4 CITY-S	T-71P				

14. 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 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, with all other like empowered.