

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

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FILED**

DOCUMENT # N32469

(1)

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1. Corporation Name

BERKELEY PLAZA TOWNHOUSE ASSOCIATION, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**51 BERKELEY ST
SATELLITE BEACH FL 32937**

Mailing Address

**51 BERKELEY ST
SATELLITE BEACH FL 32937**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/24/1989

3a. Date of Last Report

04/05/1994

4. FEI Number

59-2058093

Applied For

Not Applicable

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

**LUCA, TED
51 BERKELEY ST
SATELLITE BEACH FL 32937**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

DP

NAME

LUCA, TED

STREET ADDRESS

51 BERKELEY STREET

CITY - ST - ZIP

SATELLITE BEACH FL

TITLE

ST

NAME

LUCA, ANNA T.

STREET ADDRESS

51 BERKELEY ST

CITY - ST - ZIP

SATELLITE BEACH FL

TITLE

D

NAME

SCUOTTO, PAT

STREET ADDRESS

57 BERKELEY ST.

CITY - ST - ZIP

SATELLITE BEACH FL

TITLE

D

NAME

ERSCOLONI, GUY

STREET ADDRESS

53 BERKELEY STREET

CITY - ST - ZIP

SATELLITE BEACH FL

TITLE

D

NAME

ALDERFER, JUSTIN

STREET ADDRESS

61 BERKELEY ST.

CITY - ST - ZIP

SATELLITE BEACH FL

TITLE

V

NAME

STEWART, GREGORY

STREET ADDRESS

49 BERKELEY STR

CITY - ST - ZIP

SATELLITE BCH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

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**D NANCY ROTHBAUER
59 BERKELEY ST
SATELLITE BEACH FL**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 creator 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.

SIGNATURE:

ANNA T. LUCA

4-12-95

777-0581

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Chapter 174