


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

**FILED**  
**May 13, 2005 8:00 am**  
**Secretary of State**

05-13-2005 90226 008 \*\*\*\*61.25

**DOCUMENT # N34173**

1. Entity Name  
**BRITTANY PARK/TARPON TRACE HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business      Mailing Address

**757 BRITTANY PK. BLVD.  
TARPON, FL 34689 US**      **P.O. BOX 2313  
TARPON SPRINGS, FL 34688-2313**

**50052393**



02102005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number **59-3038334**      Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

8. Name and Address of Current Registered Agent

**CIANFRONE, JOSEPH R PA  
1968 BAYSHORE BLVD.  
DUNEDIN, FL 34698**

**DO NOT WRITE IN THIS SPACE**

9. 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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	S
NAME	HILTON, STEPHEN
STREET ADDRESS	923 HUNTER LANE
CITY-STATE-ZIP	TARPON SPRINGS, FL 34689
TITLE	PO
NAME	PAVLOU, CHRIS
STREET ADDRESS	757 BRITTANY PARK BLVD
CITY-STATE-ZIP	TARPON SPRINGS, FL
TITLE	D
NAME	<del>WASSON, ANNA</del> <b>KENNEDY, GLENN</b>
STREET ADDRESS	<del>923 BRITTANY PARK BLVD</del> <b>918 BRITTANY PK BLVD</b>
CITY-STATE-ZIP	TARPON SPRINGS, FL 34689
TITLE	TD
NAME	<del>SHAPIRO, HERBERT</del> <b>KALCH, CHARLES</b>
STREET ADDRESS	<del>1204 HUNTER LANE</del> <b>1734 HUNTER LN</b>
CITY-STATE-ZIP	TARPON SPRINGS, FL 34689
TITLE	D
NAME	<del>JACK, GEORGE</del> <b>HARRELL, JASON</b>
STREET ADDRESS	<del>767 BRITTANY PK BLVD</del> <b>1751 BIARRITE CIR</b>
CITY-STATE-ZIP	<del>TARPON SPRINGS, FL 34689</del>
TITLE	
NAME	<b>LINDA GARDINER</b>
STREET ADDRESS	<b>1700 HUNTER LANE</b>
CITY-STATE-ZIP	<b>TARPON SPRINGS, FL 34689</b>

**DO NOT WRITE 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)(d), 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 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: Stephen Hilton      STEPHEN HILTON      5/9/05  
SIGNATURE, TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR      Date      (Daytime Phone #)

727 556-1263