## 2006 NOT-FOR-PROFIT CORPORATION

## Jul 27, 2006 8:00 am ANNUAL REPORT **Secretary of State** DOCUMENT # N34631 07-27-2006 90017 040 \*\*\*\*61.25 BERRYHILL HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 389 STERLING DR., SE P.O. BOX 7011 WINTER HAVEN, FL 33884 WINTER HAVEN, FL 33883 2. Principal Place of Business 3. Mailing Address 381 Sterling Drive P.O. BOX 7011 Suite Ant # etc. Suite, Apt. #, etc. 07242006 Cha-NP CR2E037 (4/06) Applied For 4. FEI Number 59-2975474 Winter Haven, FL Winter Haven, Fl Not Applicable Country U.S. A <sub>Zip</sub> 33883 Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6.-Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BENNETT, BARRY W 60 SECOND ST. S.E. Street Address (P.O. Box Number is Not Acceptable) WINTER HAVEN, FL 33880 City Zip Code 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. Lam 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 Fillng Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Due by September 6, 2006 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE Change chartie Adams MASTERSON, MICHAEL NAME NAME STREET ADDRESS 505 MONTGOMERY PL 318 sterling Drive STREET ADDRESS CITY-ST-ZIP WINTER HAVEN, FL 33884 CITY-ST-7IP winter Haven, Fl. 33884 TD TITLE Delete TITLE Change ☐ Addition DUSTIN, BRENDA NAME NAME Ana M Castaneda STREET ADDRESS 389 STERLING DR., SE 381 Sterling Dr. Winter Haven, Fl STREET ADDRESS CITY-ST-ZIP WINTER HAVEN, FL 33884 CiTY-ST-ZIP 33884 TITLE Delete TITLE Change Ch ☐ Addition KIESSLING, DAVID Gwenette Deese NAME 502 MONTGOMERY STREET ADDRESS STREET ADDRESS 409 BIGSTOFF Dr. Winter Haven, F CITY-ST-ZIP WINTER HAVEN, FL 33884 CITY-ST-ZIP 33884 TITLE Delete TITLE ☐ Change ■ Addition Beatrice Louis 342 Sterling Dr. Winter Haven, Fl FISHER, CARRIE NAME NAME STREET ADDRESS 428 BIG STAFF COURT STREET ADDRESS CITY-ST-ZIP WINTER HAVEN, FL 33884 CITY-ST-ZIP 33884 THE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signalure 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

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

(803)

FILED