

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2008 08:00 A
Secretary of State

DOCUMENT # N42088

1. Entity Name
**BARDMOOR BOULEVARD BEAUTIFICATION COUNCIL,
INC.**



Principal Place of Business
**9797 BARDMOOR BLVD
LARGO, FL 33777 US**

Mailing Address
**9797 BARDMOOR BLVD
LARGO, FL 33777 US**



03172008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3051017

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**FREGAPANE, JOSEPH A
9797 BARDMOOR BLVD, # D
LARGO, FL 33777**

**DO NOT WRITE
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, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

U000000864881
04/07/08-80005-010 61.25

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
WOODBURN, CAROL
9797 BARDMOOR BLVD, # 8
LARGO, FL 33777**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
PULLIS, LOUISE L
8454 CANDLEWOOD RD
LARGO, FL 33777**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
FREGAPANE, JOSEPH A
9797 BARDMOOR BLVD, #D
LARGO, FL 33777**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
WOODBURN, PAUL C
9797 BARDMOOR BLVD, #B
LARGO, FL 33777**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby 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 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: Joseph A. Fregapane **JOSEPH A FREGAPANE** 3/17/08 727-319-2498
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #