FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N45448

(0)

BRANDON HILLS PROPERTY OWNERS ASSOCIATION, INC.

210 012			~		
Principal Plac	e of Business	Mailing Address			- - - - - - - - - - - -
605 N SYLVAN DR BRANDON FL 33510		614 BEVERLY DR. BRANDON FL 33510-3502 US			
		•		3. Date Incorporated or Qualified 10/02/1991	3a. Date of Last Report 04/25/1996
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# oto	Suite, Apt. #, etc.		65-0291498	Not Applicable
22	#, C)O.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country า	8. This corporation has liability for in	
24	25 9. Name and Address of Cu	29 30	<u> </u>	Florida Statutes 10. Name and Address of New Reg	Yes No
81 Name 16-20 O DOLO 377					
HE/				BIVED IS DIFF	1122
HARDY, JOYCE A. 605 N SYLVAN DR			82 Street Add	ress (P.O. Box Number is Not Acceptable	Dr.
	ON FL 33510				
51011151	214 1 2 000 10		84 City	3	SE Zin Codo
			0	KANDON	FL 85 Zo Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 objigations of, Section 617.0503, Florida Statutes.					
SIGNATURE Homy (Worden / STAR R WROW 3/4/97					
12.	Signature Typed or printed name of registers	ed agent and title if applicable. (NOTE: R B AND DIRECTORS	egistered Agent signature require 13.	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE
TITLE	D	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	WALLOGA, MARK	_	1.2 NAME		
STREET ADDRESS	707 N SYLVAN		1.3 STREET ADDRESS		
CITY-ST-ZIP	BRANDON FL		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	SCHAPPER, AUDREY		2.2 NAME		•
STREET ADDRESS	706 N SYLVAN		2.3 STREET ADDRESS		
CITY-ST-ZIP	BRANDON FL		2.4 CITY-ST-ZIP		
TITLE	0	QELETE .	3.1 TITLE		☐ Change ☐ Addition
NAME	DARDEN, HENRY R		3.2 NAME		
STREET ADDRESS	614 BEVERLY DR		3.3 STREET ADDRESS		
CITY-S1-ZIP TITLE	BRANDON FL	☐ DELETE	3.4. CITY-ST-ZIP		Change Addition
NAME	D DEMANY	☐ NETC1E	4.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS	HALL, PENNY 602 BEVERLY DRIVE		4.2 NAME 4.3 Street address		
CITY-S1-ZIP	BRANDON FL		4.4 CITY - ST - ZIP		
TITLE	VINITALI P	☐ DELETE	5.1 TITLE		Change Addition
NAME		_	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		,
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - S1 - ZIP	•		6.4 CITY-ST-ZIP		• •

14. I do 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 armual 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 appartachment with an address.

SIGNATURE:

FILED

Mar 06 1997 8:00am

Secretary of State