

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90218 012 ****61.25

DOCUMENT # N94000001601

1. Entity Name
BRANTLEY ESTATES HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business
**2755 BORDER LAKE ROAD STE 101
APOPKA, FL 32703-4857 US**

Mailing Address
**2755 BORDER LAKE ROAD STE 101
APOPKA, FL 32703-4857 US**

50014339



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01092006

Chg-NP

CR2E037 (11/05)

4. FEI Number
59-3252221

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KANAGA, MERIDYTHE
2755 BORDER LAKE ROAD STE 101
APOPKA, FL 32703-4857**

Name

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

City

FL

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. 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, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DS ☐ Delete
NAME DAVIDSON, JUDY
STREET ADDRESS 1140 BRANTLEY ESTATES DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE DP ☐ Change ☒ Addition
NAME LIETZ, LISA
STREET ADDRESS 1131 BRANTLEY ESTATES DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE D ☐ Delete
NAME DINARDO, DAVID
STREET ADDRESS 1194 BRANTLEY ESTATES DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE DVP ☒ Change ☐ Addition
NAME DINARDO, DAVID
STREET ADDRESS 1194 BRANTLEY ESTATES DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE DP ☒ Delete
NAME SANTOS, WILLIAM
STREET ADDRESS 1150 BRANTLEY ESTATES DR
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE DT ☐ Change ☒ Addition
NAME HART, TRISH
STREET ADDRESS 1132 BRANTLEY ESTATES DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE DVP ☒ Delete
NAME SHERMAN, RICHARD
STREET ADDRESS 1184 BRANTLEY ESTATES DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE D ☐ Change ☒ Addition
NAME KAPLAN, WARREN
STREET ADDRESS 1186 BRANTLEY ESTATES DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE D ☒ Delete
NAME LOMBARDO, SALVATORE
STREET ADDRESS 1152 BRANTLEY ESTATES DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE D ☐ Change ☒ Addition
NAME WALSH, THOM
STREET ADDRESS 1188 BRANTLEY ESTATES DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE DT ☒ Delete
NAME AUGUSTINE, CARRIE
STREET ADDRESS 1182 BRANTLEY ESTATES DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE D ☐ Change ☐ Addition
NAME ASCH, BARRY
STREET ADDRESS 1190 BRANTLEY ESTATES DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Patricia Hart Patricia Hart

4/6/06

407-862-2292