FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # N9500000221

BRITTANY GARDENS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business 2670 ULTRA VISTA DR

Mailing Address

2670 ULTRA VISTA DR

FILED Mar 10, 1999 8:00 am § Secretary of State

03-10-1999 90233 023 ****70.00

|--|--|--|--|

MAITLAND FL	32751	MAITLAND FL 32751 US						
				• .				
— ·	ace of Business	2a. Mailing Address		3. Date incorporated or Qualifed 01/17/1995				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		4. FEI Number NOT APPLICABLE Applied For Not Applicable				
City & State	e	City & State		5. Certifcate of Status Desired \$8.75 Additional Fee Required				
Zip	Country	Zip 31	Country	6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees				
24	9. Name and Address of Current	11	J	10. Name and Address of New Registered Agent				
NOVAK, P. 2654 ULTF MAITLAND	aul Ra vista drive	· Neglociou / gan	83	DEDERING, KAREN Address (P.O. Box Number is Not Acceptable) 80 QUEEN MARY PLACE				
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 obligations of, Section 617.0503, Florida Statutes. SIGNATURE								
12.	Signature, woed or printed name of registered agent		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PD	☐ DELETE	1.1 TITLÉ	PD Change Addition				
NAME	NYLEN, KAREN		1.2 NAME	DEDERING, KAREN				
STREET ADDRESS	2680 QUEEN MARY PLACE		1.3 STREET ADDRESS	2680 QUEN MARY PLACE				
CITY-ST-ZIP	MAITLAND FL 32751		1.4 CITY-ST-ZIP	MAITLAND, FLB275 1				
TITLE	VPD	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition				
NAME	GONZALES, ANGEL		2.2 NAME	GONZALEZ				
STREET ADDRESS	2640 QUEEN MARY PLACE		2.3 STREET ADDRESS					
CITY-ST-ZIP	MAITLAND FL 32751		2. 4 CITY-ST-ZIP					
TITLE	TD	⊠ DELETE	3.1 TITLE	TD				
NAME	BRYANT, RICHARD		3.2 NAME	KEARLEY, JAMIE				
STREET ADDRESS	2644 QUEEN MARY PLACE		3.3 STREET ADDRESS	KEARLEY, JAMIE 2636 QUEEN MARY PLACE				
CITY-ST-ZIP	MAITLAND FL 32751		3.4. CITY-ST-ZIP	MAITLAND, FL 32751				
TITLE	SD	☐ DELETE	4.1 TITLE	. Change Addition				
NAME	BRUSHWOOD, BECKY		4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-ST-ZIP	MAITLAND FL 32751		4.4 CITY-ST-ZIP					
TITLE	Walle and the delta.	☐ 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				
			6.2 NAME					
NAME			6.3 STREET ADDRESS					
STREET ADDRESS			6.4 CITY ST 7ID					

14. I 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 annual 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 an attachment with an address, with all other like empowered.

SIGNATURE: