


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 25, 2005 8:00 am**  
**Secretary of State**

01-20-2005 90038 048 \*\*\*\*61.25

<b>DOCUMENT # N9500000221</b>			
1. Entity Name <b>BRITTANY GARDENS HOMEOWNERS ASSOCIATION, INC.</b>			
Principal Place of Business <b>2670 ULTRA VISTA DR MAITLAND, FL 32751 US</b>		Mailing Address <b>2670 ULTRA VISTA DR MAITLAND, FL 32751 US</b>	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number <b>NOT APPLICABLE</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <del>DAWSON, ROD 2658 ULTRA VISTA DRIVE MAITLAND, FL 32751</del>		7. Name and Address of New Registered Agent Name <b>NATHAN A. MCCOY</b> Street Address (P.O. Box Number is Not Acceptable) <b>2636 Queen Mary Pl.</b> City <b>Maitland</b> FL Zip Code <b>32751</b>	
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 <i>Nath A. McCoy</i> DATE <b>1/15/05</b> <small>Signature of or printed name of registered agent and the filer. (NOTE: Registered Agent signature required when remaining)</small>			
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>D KUTNER, STEVEN R</b> 2671 ULTRA VISTA DR MAITLAND, FL 32751 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>Teolis, Gene PRES.</b> 2642 Ultra Vista Dr. Maitland, FL 32751 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>T BRYANT, CHERYL</b> 2672 QUEEN MARY PL. MAITLAND, FL 32751 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>VPO FLOEGEL, ALFRED J</b> 2655 ULTRA VISTA DR MAITLAND, FL 32751 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>P DAWSON, ROD</b> 2658 ULTRA VISTA DRIVE MAITLAND, FL 32751 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>Tompkins, Erin, VP.</b> 2671 Ultra Vista Dr. Maitland, FL 32751 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Vice Pres.</b>
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>McCoy, Nathan, SEC.</b> 2636 Queen Mary Pl Maitland FL 32751 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Sec.</b>
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 190.07(3)(b), 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: <i>Nath A. McCoy</i>		DATE: <b>1/15/05</b> (907) 644-6046	

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01142005 Chg-NP CR2E037 (10/03)

*See attached on back AS well.*