

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000299

FILED
Apr 16, 2009
Secretary of State

Entity Name: CLUB VILLAS OF BERKSHIRE PLACE ASSOCIATION, INC.

Current Principal Place of Business:

1205 BERKSHIRE CIRCLE
VENICE, FL 34292 US

New Principal Place of Business:

Current Mailing Address:

1205 BERKSHIRE CIRCLE
VENICE, FL 34292 US

New Mailing Address:

FEI Number: 65-0572290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALEN, CINDY
1209 BERKSHIRE CIRCLE
VENICE, FL 34292 US

Name and Address of New Registered Agent:

FRAZIER, ELEANOR F
1218 BERKSHIRE CIRCLE
VENICE, FL 34292 US

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.

SIGNATURE: ELEANOR F. FRAZIER

04/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STRICKLAND, BILL
Address: 1244 BERKSHIRE CIRCLE
City-St-Zip: VENICE, FL 34292

Title: VD () Delete
Name: SHAW, DALE
Address: 1215 BERKSHIRE CIRCLE
City-St-Zip: VENICE, FL 34292

Title: TD () Delete
Name: SUAREZ, ROSEMARY
Address: 1256 BERSHIRE CIRCLE
City-St-Zip: VENICE, FL 34292

Title: SD () Delete
Name: GALEN, CINDY
Address: 1209 BERKSHIRE CIRCLE
City-St-Zip: VENICE, FL 34292

Title: D () Delete
Name: LOFFLER, KEN
Address: 1224 BERSHIRE CIRCLE
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SHAW, DALE
Address: 1215 BERKSHIRE CIRCLE
City-St-Zip: VENICE, FL 34292

Title: T (X) Change () Addition
Name: SUAREZ, ROSEMARY
Address: 1256 BERKSHIRE CIRCLE
City-St-Zip: VENICE, FL 34292

Title: S (X) Change () Addition
Name: FRAZIER, ELEANOR
Address: 1218 BERKSHIRE CIRCLE
City-St-Zip: VENICE, FL 34292

Title: D (X) Change () Addition
Name: LOFFLER, KEN
Address: 1224 BERKSHIRE CIRCLE
City-St-Zip: VENICE, FL 34292

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELEANOR F. FRAZIER

S

04/16/2009

Electronic Signature of Signing Officer or Director

Date