

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED  
Aug 22 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>	 FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000004612 (5)**  
1. Corporation Name

**BRENDAN COVE HOMEOWNERS' ASSOCIATION, INC.**



Principal Place of Business <b>25151 PENNYROYAL DRIVE BONITA SPRINGS FL 33923</b>	Mailing Address <b>25151 PENNYROYAL DRIVE BONITA SPRINGS FL 33923</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>2524 SW 45th Street</b>		2a. Mailing Address 26 <b>2524 SW 45th St.</b>		3. Date Incorporated or Qualified <b>08/28/1996</b>		3a. Date of Last Report	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number <b>65-0749172</b>		Applied For Not Applicable	
23 City & State <b>CAPE CORAL, FL</b>		28 City & State <b>CAPE CORAL, FL</b>		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
24 Zip <b>33914</b>		25 Country <b>U.S.A.</b>		29 Zip <b>33914</b>		30 Country <b>U.S.A.</b>	
g. Name and Address of Current Registered Agent <b>ROSINUS, FRANZ J 25151 PENNYROYAL DRIVE BONITA SPRINGS FL 33923</b>				10. Name and Address of New Registered Agent 81 Name <b>MICHAEL EHRRICH</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>2524 SW 45th Street</b> 83 84 City <b>CAPE CORAL</b> <b>FL</b> 85 Zip Code <b>33914</b>			

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 *[Signature]* **M. EHRRICH, PRESIDENT** **8/7/97**  
(NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	<b>PVST</b>		<input checked="" type="checkbox"/> DELETE		<b>P/T/S/D</b>		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<b>ROSINUS, FRANZ J</b>	<b>25151 PENNYROYAL DRIVE</b>	<b>BONITA SPRINGS FL 33923</b>		<b>EHRRICH, Michael</b>	<b>2524 SW 45th St.</b>	<b>CAPE CORAL, FL 33914</b>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
	<b>D</b>		<input checked="" type="checkbox"/> DELETE		<b>V/D</b>		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<b>ROSINUS, FRANZ J</b>	<b>25151 PENNYROYAL DRIVE</b>	<b>BONITA SPRINGS FL 33923</b>		<b>FLEISCHNER, Gerhard</b>	<b>3918 SE 94th</b>	<b>CAPE CORAL, FL 33904</b>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
	<b>D</b>		<input checked="" type="checkbox"/> DELETE		<b>V/D</b>		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<b>ROSINUS, UTE J</b>	<b>25151 PENNYROYAL DRIVE</b>	<b>BONITA SPRINGS FL 33923</b>		<b>BROWN, HOMER L.</b>	<b>25157 1st Lake Circle</b>	<b>BONITA SPRINGS, FL 34135</b>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
	<b>D</b>		<input checked="" type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>ROSENTHAL, HOWARD D</b>	<b>8951 BONITA BEACH ROAD #5125-212</b>	<b>BONITA SPRINGS FL 33923</b>				
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
			<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
			<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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, changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED** **8/7/97 (944) 549-3997**

CR2E037 (4/97)