

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 19, 2007
Secretary of State

DOCUMENT# N97000003854

Entity Name: BRAC BLUFF PASS HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**882 JACKSON AVENUE
WINTER PARK, FL 32789**New Principal Place of Business:****Current Mailing Address:**882 JACKSON AVE.
WINTER PARK, FL 32789**New Mailing Address:****FEI Number:** 59-3503002**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RAY, KEVIN
882 JACKSON AVE.
WINTER PARK, FL 32789 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** DP () Delete
Name: DEFRIETAS, RICHARD
Address: 241 E. IDLEWILD AVE.
City-St-Zip: EUSTIS, FL 32726**Title:** DVP () Delete
Name: BUTLER, DANNY
Address: 516 RYANS RIDGE AVE.
City-St-Zip: EUSTIS, FL 32726**Title:** DS () Delete
Name: FULLER, MARY II
Address: 209 BLUFF PASS DRIVE
City-St-Zip: EUSTIS, FL 32726**Title:** DT (X) Delete
Name: DOTSON, JULIE
Address: 312 RYANS RIDGE AVE.
City-St-Zip: EUSTIS, FL 32726**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DP (X) Change () Addition
Name: SHAW, MARTINA
Address: 309 RYAN'S RIDGE AVE.
City-St-Zip: EUSTIS, FL 32726**Title:** DST (X) Change () Addition
Name: BUTLER, DANNY
Address: 516 RYANS RIDGE AVE.
City-St-Zip: EUSTIS, FL 32726**Title:** DVP (X) Change () Addition
Name: JOHNSON, GARY
Address: 404 BLUFF PASS DRIVE
City-St-Zip: EUSTIS, FL 32726**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: MARTINA SHAW

PD

11/19/2007

Electronic Signature of Signing Officer or Director

Date