2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Jun 21, 2006 8:00 am **DOCUMENT # N98000002719 Secretary of State** COURTYARDS AT BARDMOOR HOMEOWNERS' ASSOCIATION, INC. 06-21-2006 90001 045 ****61.25 Principal Place of Business Mailing Address 8078 ELISABETH LANE 8060 **3928** ELISABETH LANE 8060 LARGO, FL 33777 LARGO, FL 33777 2. Principal Place of Business Mailing Address 80100 E Suite, Apt. #, etc. Suite, Apt. #, etc 06142006 Cha-NP CR2E037 (4/06) City & State City & State 4. FEI Number 59-3518423 Applied For arg Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CATO, TOM Street Address (P.O. Box Number is Not Acceptable) 8168 ELISABETH LANE LARGO, FL 33777 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due by September 6, 2006 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE ■ Addition Change Culbertson, Chris **CULBERTSON, CHRIS** NAME NAME 8024 Elisabeth Lane STREET ADDRESS 8024 ELISABETH LANE STREET ADDRESS CITY-ST-7IP LARGO, FL 33777 CITY-ST-ZIP Largo, FL. 33777 X Addition TITLE ☐ Change 🔽 Delete TITLE Swank, Ronette TIRUPATHI, PAUL NAME 2000 Elisabeth Lane STREET ADDRESS 8186 ELIZABETH LANE STREET ADDRESS CITY-ST-7IP LARGO, FL 33777 CITY-ST-7IP Delete Addition X TITLE TITLE SWATLAND, ROBERT NAME NAME STREET ADDRESS 8027 ELISABETH LANE STREET ADDRESS CITY-ST-ZIP LARGO, FL 33777 CITY-ST-ZIP ☐ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TIDE ☐ Detete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete ☐ Addition TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

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June 12, 2006 727.391.9304

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