

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002719

FILED  
Jan 05, 2007  
Secretary of State

**Entity Name:** COURTYARDS AT BARDMOOR HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

8060 ELISABETH LN  
LARGO, FL 33777

**New Principal Place of Business:**

**Current Mailing Address:**

8060 ELISABETH LN  
LARGO, FL 33777

**New Mailing Address:**

**FEI Number:** 59-3518423

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CATO, TOM  
8168 ELISABETH LANE  
LARGO, FL 33777 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: P ( ) Delete  
Name: CULBERTSON, CHRIS  
Address: 8024 ELISABETH LANE  
City-St-Zip: LARGO, FL 33777

Title: T ( ) Delete  
Name: SWANK, RONETTE  
Address: 8060 ELISABETH LANE  
City-St-Zip: LARGO, FL 33777

Title: S ( ) Delete  
Name: SPURR, ANDREA  
Address: 8006 ELISABETH LANE  
City-St-Zip: LARGO, FL 33777

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: RONETTE SWANK

T

01/05/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date