

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90278 026 ****61.25

DOCUMENT # N99000000951

1. Entity Name
**CONDOMINIUM ASSOCIATION OF CLUBSIDE VILLAS AT
BALLANTRAE, INC.**



Principal Place of Business
**1930 COMMERCE LANE
SUITE 1
JUPITER, FL 33458**

Mailing Address
**1930 COMMERCE LANE
SUITE 1
JUPITER, FL 33458**

40078201



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03292007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
65-0899750

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BRISTOL MANAGEMENT
1930 COMMERCE LANS
SUITE 1
JUPITER, FL 33458**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME STEWART, KAREN
STREET ADDRESS 1533 PRESTWICK LANE
CITY-ST-ZIP PORT SAINT LUCIE, FL 34952

TITLE ☒ Change ☐ Addition
NAME **P MICHAEL PIATT**
STREET ADDRESS **1551 SE PRESTWICK LANE**
CITY-ST-ZIP **PORT ST. LUCIE, FL 34953**

TITLE VPD ☐ Delete
NAME RODGERS, DEREK
STREET ADDRESS 1481 PRESTWICK LANE
CITY-ST-ZIP PORT SAINT LUCIE, FL 34952

TITLE ☒ Change ☐ Addition
NAME **VP TERENCE J. TYCHAN**
STREET ADDRESS **1515 SE PRESTWICK LANE**
CITY-ST-ZIP **PORT ST. LUCIE, FL 34953**

TITLE SD ☐ Delete
NAME KIRCHMEIR, JANET
STREET ADDRESS 1581 PRESTWICK LANE
CITY-ST-ZIP PORT SAINT LUCIE, FL 34952

TITLE ☒ Change ☐ Addition
NAME **S MARIA PACE**
STREET ADDRESS **1546 SE PRESTWICK LANE**
CITY-ST-ZIP **PORT ST. LUCIE, FL 34953**

TITLE D ☐ Delete
NAME HEIBAUER, RODNEY
STREET ADDRESS 1523 PRESTWICK LANE
CITY-ST-ZIP PORT SAINT LUCIE, FL 34952

TITLE ☒ Change ☐ Addition
NAME **T RODNEY D. NEIBAUER**
STREET ADDRESS **1523 SE PRESTWICK LANE**
CITY-ST-ZIP **PORT ST. LUCIE, FL 34953**

TITLE D ☐ Delete
NAME KIRCHMILER, JANET
STREET ADDRESS 1523 SE PRESTWICK LANE
CITY-ST-ZIP PORT SAINT LUCIE, FL 34952

TITLE ☒ Change ☐ Addition
NAME **D ANDREW SMITH**
STREET ADDRESS **1557 SE PRESTWICK LANE**
CITY-ST-ZIP **PORT ST. LUCIE, FL 34953**

TITLE TD ☐ Delete
NAME STEWART, WILLIAM
STREET ADDRESS 1533 PRESTWICK LANE
CITY-ST-ZIP PORT SAINT LUCIE, FL 34952

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

4-5-07

722-335-0405