

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 722877

**FILED**  
**Mar 19, 2015**  
**Secretary of State**  
**CC8875584123**

**Entity Name:** BERKLEY HOUSE OF PORT CHARLOTTE- A CONDOMINIUM, INC.

**Current Principal Place of Business:**

BERKLEY HOUSE OF PORT CHARLOTTE  
MANAGER'S OFFICE 2296 AARON STREET  
PORT CHARLOTTE, FL 33952

**Current Mailing Address:**

ADVANCED MANAGEMENT, INC. OF SOUTHWEST FLORIDA  
899 WOODBRIDGE DRIVE  
VENICE, FL 34293 US

**FEI Number: 59-1574987**

**Certificate of Status Desired: No**

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

MOORE, DONALD  
C/O MANAGEMENT OFFICE  
2296 AARON STREET  
PORT CHARLOTTE, FL 33952 US

*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: DONALD MOORE** **03/19/2015**  
\_\_\_\_\_  
Electronic Signature of Registered Agent Date

**Officer/Director Detail :**

Title PD  
Name MOORE, DON  
Address 21300 BRINSON AVE #116  
City-State-Zip: PORT CHARLOTTE FL 33952

Title VPD  
Name MILLER, JOHN  
Address 21300 BRINSON AVE #203  
City-State-Zip: PORT CHARLOTTE FL 33952

Title D  
Name SUSAN, DOLPHIN  
Address 21300 BRINSON AVE #105  
City-State-Zip: PORT CHARLOTTE FL 33952

Title STD  
Name MCNEIL, JOHN  
Address 21300 BRINSON AVE #208  
City-State-Zip: PORT CHARLOTTE FL 33952

Title D  
Name JUDKINS, CHARLIE  
Address 21300 BRINSON AVE #216  
City-State-Zip: PORT CHARLOTTE FL 33952

*I hereby 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 all other like empowered.*

**SIGNATURE: DONALD MOORE** **PRESIDENT** **03/19/2015**  
\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail Date