

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737214

Entity Name: BRIAR CREEK MOBILE HOME COMMUNITY I, INC.**Current Principal Place of Business:**4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685**Current Mailing Address:**4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US**FEI Number:** 59-1718777**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REARDON, MAUREEN C
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title PRES
Name CLARK, JEFF
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title VP
Name SHAPIRO, MARTIN
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title TRE
Name HARTIN, AL
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title SEC
Name HOLMES, CONNIE
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title D
Name JABLONSKI, RAY
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title DIRECTOR
Name PICKERING, JOHN
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

Title DIRECTOR
Name WARDELL, EVERETT
Address 4151 WOODLANDS PARKWAY
City-State-Zip: PALM HARBOR FL 34685

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: JEFF CLARK

PRESIDENT

02/26/2018

Electronic Signature of Signing Officer/Director Detail_____
Date