

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# N02891

Entity Name: TOWNHOMES OF BRIARWOOD ASSOCIATION, INC.

Current Principal Place of Business:

13525-2 SIESTA PINES CT
FT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

13525-2 SIESTA PINES CT
FT MYERS, FL 33908

New Mailing Address:

FEI Number: 59-2412485 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCGRAIN, SUSAN
13525-2 SIESTA PINES CT
FT MYERS, FL 33908 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: ELMERS, CHARLES
Address: 13531 SIESTA PINES CT
City-St-Zip: FORT MYERS, FL 33908

Title: TD () Delete
Name: MCGRAIN, SUSAN
Address: 13525-2 SIESTA PINES CT
City-St-Zip: FT MYERS, FL 33908

Title: DV () Delete
Name: BERGER, REBECCA
Address: 13525 SIESTA PINES CT
City-St-Zip: FT MYERS, FL 33908

Title: S () Delete
Name: BENKERT, KAREN
Address: 13529 SIESTA PINES CT SW
City-St-Zip: FT. MYERS, FL

Title: D () Delete
Name: SUPALO, RICHARD
Address: 13525-1 SIESTA PINES CT
City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete
Name: CHRISTENSEN, DAVID
Address: 13539 SIESTA PINES CT
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: DAVID, CHRISTENSEN
Address: 13539 SIESTA PINES CT
City-St-Zip: FT MYERS, FL 33908

Title: S (X) Change () Addition
Name: BENKERT, KAREN
Address: 13529 SIESTA PINES CT
City-St-Zip: FT. MYERS, FL 33908

Title: D (X) Change () Addition
Name: ARTHUR, LA MOUNTAIN
Address: 13525-3
City-St-Zip: FORT MYERS, FL 33908

Title: D (X) Change () Addition
Name: PATRICK, WALKER
Address: 13527 SIESTA PINES CT
City-St-Zip: FORT MYERS, FL 33908

I hereby certify that the information supplied with this filing does not qualify 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: SUSAN MCGRAIN

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01/07/2009

Electronic Signature of Signing Officer or Director

Date