

**2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Oct 07, 2010  
Secretary of State**

DOCUMENT# N92000000735

**Entity Name:** BROOKSIDE AT INDIAN SPRINGS HOMEOWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**6352 SHADOW CREEK VILLAGE CIRCLE  
LAKE WORTH, FL 33463 US**New Principal Place of Business:**DAVENPORT PROF. PROP. MGMT. INC.  
6620 LAKE WORTH RD, STE F  
LAKE WORTH, FL 33467 US**Current Mailing Address:**PO BOX 541058  
LAKE WORTH, FL 33454 US**New Mailing Address:**DAVENPORT PROF. PROP. MGMT. INC.  
6620 LAKE WORTH RD, STE F  
LAKE WORTH, FL 33467 US

FEI Number: 65-0406361

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**THE RAM REALTY GROUP, INC.  
6352 SHADOW CREEK VILLAGE CIRCLE  
LAKE WORTH, FL 33463 US**Name and Address of New Registered Agent:**DICKER, KRIVOK & STOLOFF PA  
1818 AUSTRALIAN AVE,  
SUITE 400  
WEST PALM BEACH, FL 33409 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: E. DICKER ESQ.

10/07/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: PD  
Name: WASSERMAN, WENDY  
Address: 6620 LAKE WORTH RD. STE F  
City-St-Zip: LAKE WORTH, FL 33467Title: 1VPD  
Name: RADNER, ROBERT  
Address: 6620 LAKE WORTH STE F  
City-St-Zip: LAKE WORTH, FL 33467Title: 2VPD  
Name: CAPONE, RAY  
Address: 6620 LAKE WORTH RD STE F  
City-St-Zip: LAKE WORTH, FL 33467Title: DS  
Name: BURSTEIN, PAUL  
Address: 6620 LAKE WORTH RD. STE F  
City-St-Zip: LAKE WORTH, FL 33467Title: TD  
Name: KEIMACH, LOUIS  
Address: 6620 LAKE WORTH RD. STE F  
City-St-Zip: LAKE WORTH, FL 33467

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: WENDY WASSERMAN

PD

10/07/2010

Electronic Signature of Signing Officer or Director

Date