2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 27, 2004 8:00 am Secretary of State

DOCUMENT # N9400001604 1. Entity Name BROOKHOLLOW OWNERS ASSOCIATION, INC.				. 04-27-	2004 90091 015 ****61.25	
Principal Place of Business C/O SIGNATURE REALTY 9889-1 SAN JOSE BLVD JACKSONVILLE, FL 32257 US Mailing Address C/O SIGNATURE REALTY 9889-1 SAN JOSE BLVD JACKSONVILLE, FL 32257 US			v us	FURBUICU FOR ININ FRAII ABI	: 40 40 10 10 11	
2. Principal Place of Business 3. M		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CR2E037 (10/03)	
City & State		City & State			Applied For Not Applicable	
Zip Country		Zip			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		
SIGNATURE REALTY & MANAGEMENT				Street Clo Signature Reafty Street Clo Signature Reafty Street Clo Signature Reafty		
9889-1 SAN JOSE BOULEVARD JACKSONVILLE, FL 32257			4003 Hartley Road			
- Tacks					FL 32257	
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						
				\$5.00 May Be Added to Fees	Make check payable to Florida Department of State	
10.	OFFICERS AND DIR	FCTORS	11,	<u></u>	OFFICERS AND DIRECTORS IN 10	
TITLE	PD STREETS AND BIN	Delete				
NAME	NETTLES, CHARLES	y Donate	NAME	Naucy Van Pel 32 Blue Pacific	Drive	
STREET ADDRESS	5656 BLUE PACIFIC DRIVE		STREET ADDRESS	KSONUIR FL 3	21257	
CITY-ST-ZIP	JACKSONVILLE, FL 32257				1000	
TITLE	VPD	Delete	TITLE VPD	Jim Royal	☐ Change 🙀 Addition	
NAME	HILL, JIM		NAME 1938	26 Blue Pach	ic coult	
STREET ADDRESS CITY-ST-ZIP	5608 BLUE PACIFIC DRIVE	المستند كدين المراد	STREET ADDRESS CITY-ST-ZIP Jac	KSONVILLE FL	2224	
	JACKSONVILLE, FL 32257					
TITLE NAME	DOZIER, RAY	Delete		Maria Bena		
STREET ADDRESS	5444 BLUE PACIFIC DRIVE		STREET ADDRESS	57 Blue Poch		
CITY-ST-ZIP	JACKSONVILLE, FL 32257	. .	CITY-ST-ZIP Joe	KSONVIlle FO	- 32257	
TITLE	D	Delete				
NAME	SCHAD, TOM		NAME CAND	Jennifer Mot 17 Blue Pacif	is Drive	
STREET ADDRESS	5621 BLUE PACIFIC DRIVE		STREET ADDRESS	be the	21157	
CITY-ST-ZIP	JACKSONVILLE, FL 32257			Ksonuille F	[] 882 /	
TITLE NAME	D COOPER, ROBERT	Delete	TITLE D - L	ee Krotzer	☐ Change ☐ Addition	
STREET ADDRESS	5473 BLUE PACIFIC DRIVE		STREET ADDRESS 108	19 Hidden Rid	de Bact	
CITY-ST-ZIP	JACKSONVILLE, FL 32257			cksonville f		
TITLE NAME		☐ Delete	7171.5	Ray Dozier	☐ Change ☐ Addition	
STREET ADDRESS			STREET ADDRESS 54	144 Blue A	acific drive	
CITY-ST-ZIP	<u> </u>		CITY-ST-ZIP	ackonul	le FL 32257	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 jeport 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.						