

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 24, 2001 8:00 am**  
**Secretary of State**

0057110

**DOCUMENT # N94000004221**

1. Entity Name

**BROOKFIELD NEIGHBORHOOD ASSOCIATION, INC.**

04-24-2001 90286 049 \*\*\*\*70.00

Principal Place of Business <b>9456 HIGHLAND OAK DRIVE TAMPA FL 33647 US</b>	Mailing Address <b>7628 N 56TH STREET SUITE 8 TAMPA FL 33617 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address <b>16105 N. FLORIDA</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc. <b>SUITE A</b>

City & State	City & State <b>LUTZ FL</b>	4. FEI Number <b>59-3267871</b>	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
Zip	Country	Zip <b>33549</b>	Country	5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent

**SPIVEY, WILLIAM C  
7628 N. 56TH STREET  
STE 8  
TAMPA FL 33617**

7. Name and Address of New Registered Agent

Name: \_\_\_\_\_

Street Address (P.O. Box Number is Not Acceptable)  
**16105 N. FLORIDA  
SUITE A**

City: **LUTZ** FL Zip Code: **33549**

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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW:  
FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D KIRINCICH, ZELKO 18155 REGENTS SQUARE DR. TAMPA FL 33647</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPD BREMPPONG, ROSE 18105 REGENTS SQUARE TAMPA FL 33647</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD PROEFROCK, K.K. 18113 COURTNEY BREEZE WAY TAMPA FL 33647</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD BAUGHMAN, HOWARD 18112 COURTNEY BREEZE WAY TAMPA FL 33647</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD MEIER, PAUL 9204 MEADOW LANE COURT TAMPA FL 33647</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D INFANZON, SUSAN 18107 REGENTS SQUARE TAMPA FL 33647</b> <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>18106 COURTNEY BREEZE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>TD SEAN CAVANAUGH 9204 MEADOW LANE TAMPA FL 33647</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 report 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.

SIGNATURE: Sean Cavanaugh SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*[Signature]* Date: \_\_\_\_\_ Daytime Phone #: **43-01**

CR2E037 (10/00)