

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006838

FILED
Aug 04, 2009
Secretary of State

Entity Name: BRIER HILL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11553 KINGS RIDGE CT S
JACKSONVILLE, FL 32218 US

New Principal Place of Business:

Current Mailing Address:

11553 KINGS RIDGE CT S
JACKSONVILLE, FL 32218 US

New Mailing Address:

FEI Number: 59-3489283 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BAKER, BERNADETTE M
11553 KINGS RIDGE COURT SOUTH
JACKSONVILLE, FL 32218 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BAKER, BERNADETTE M
Address: 11553 KINGS RIDGE COURT SOUTH
City-St-Zip: JACKSONVILLE, FL 32218

Title: VPD () Delete
Name: LOTT, BARBARA
Address: 756 CARRIAGE HILL DR
City-St-Zip: JACKSONVILLE, FL 32218

Title: C () Delete
Name: SMITH, MICHAEL
Address: 11600 KINGS RIDGE COURT NORTH
City-St-Zip: JACKSONVILLE, FL 32218

Title: DVS () Delete
Name: WILLIAMS, EULYSSA
Address: 11513 KINGS RIDGE CT S
City-St-Zip: JACKSONVILLE, FL 32218

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: BERNADETTE BAKER

DP

08/04/2009

Electronic Signature of Signing Officer or Director

Date