

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004922

FILED
Aug 10, 2006
Secretary of State

Entity Name: BRIGHTON POINTE ESTATES HOMEOWNER'S ASSOCIATION OF POLK COUNTY, INC.

Current Principal Place of Business:

POST OFFICE BOX 1922
AUBURNDALE, FL 338231922

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1922
AUBURNDALE, FL 338231922

New Mailing Address:

FEI Number: 33-1012177 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

ANDERSON, WILLIAM C
113 BRIGHTON WAY
AUBURNDALE, FL 33823 US

Name and Address of New Registered Agent:

LEHNING, CARL
135 BRIGHTON CIRCLE
AUBURNDALE, FL 33823 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: CARL LEHNING

08/10/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANDERSON, WILLIAM C
Address: 113 BRIGHTON WAY
City-St-Zip: AUBURNDALE, FL 33823

Title: VD () Delete
Name: SCHMIDT, JAMES
Address: 106 BRIGHTON CIRCLE
City-St-Zip: AUBURNDALE, FL 33823

Title: VD () Delete
Name: HOLLENSHEAD, BOB
Address: 115 BRIGHTON CIRCLE
City-St-Zip: AUBURNDALE, FL 33823

Title: SD () Delete
Name: PETERSON, JERRY
Address: 119 BRIGHTON CIRCLE
City-St-Zip: AUBURNDALE, FL 33823

Title: TD (X) Delete
Name: CALLAHAN, LAURENCE
Address: 130 BRIGHTON CIRCE
City-St-Zip: AUBURNDALE, FL 33823

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LEHNING, CARL PD
Address: 135 BRIGHTON CIRCLE
City-St-Zip: AUBURNDALE, FL 33823

Title: VD (X) Change () Addition
Name: PIGG, GENE VD
Address: 107 BRIGHTON CIRCLE
City-St-Zip: AUBURNDALE, FL 33823

Title: SD (X) Change () Addition
Name: CALLAHAN, LAURENCE R SECT/TR
Address: 130 BRIGHTON CIRCLE
City-St-Zip: AUBURNDALE, FL 33823

Title: SGT (X) Change () Addition
Name: LOPEZ, THAD SGT
Address: P.O. BOX 292
City-St-Zip: AUBURNDALE, FL 33823

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LAURENCE R. CALLAHAN

SD

08/10/2006

Electronic Signature of Signing Officer or Director

Date