


FILE NOW: FILING FEE IS \$61.25

FILED
Apr 21 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **735981** (3)
1. Corporation Name
BROOKVIEW ASSOCIATION, INC.



Principal Place of Business 13500 NE 3RD COURT #227 #227 NORTH MIAMI FL 33161 US	Mailing Address 13500 NE 3RD COURT #227 NORTH MIAMI FL 33161-3647
--	---

3. Date Incorporated or Qualified 06/01/1976	3a. Date of Last Report 06/06/1996
4. FEI Number 59-1702167	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
---	--

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DIXON, JANET
13500 NW 3 CR
S110
N MIAMI FL 33161**

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Janet Dixon*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE **4/2/97**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	DIXON, JANET	
STREET ADDRESS	#219 13500 NE 3CT. N.	
CITY-ST-ZIP	NORTH MIAMI FL 33161	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	REGMANN, JOANNA	
STREET ADDRESS	#221	
CITY-ST-ZIP	NORTH MIAMI FL 33161	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	ADAMS, ALLSON	
STREET ADDRESS	13500 N.E. 3 CT. #306	
CITY-ST-ZIP	NORTH MIAMI FL 33161	
TITLE	ASD	<input type="checkbox"/> DELETE
NAME	VEQUILLA, MARGARETA	
STREET ADDRESS	13500 NE 3RD CT.	
CITY-ST-ZIP	NORTH MIAMI FL 33161	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	MCKAY, LORETTA	
STREET ADDRESS	13500 N.E. 3 CT. #409	
CITY-ST-ZIP	NORTH MIAMI FL 33161	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Janet Dixon 4/2/97 305-898-1154

CR2E037 (9/96)