

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)


**FILED**  
**Apr 21, 2004 8:00 am**  
**Secretary of State**

03-29-2004 90063 032 \*\*\*\*61.25

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MOORE CR2E037 (11/03)

<b>DOCUMENT # N97000003834</b>					
1. Entity Name <b>BROOKE RIDGE HOMEOWNERS ASSOCIATION OF PINELLAS COUNTY, INC.</b>					
Principal Place of Business <b>1320 ALEXANDER WAY CLEARWATER FL 33756</b>			Mailing Address <b>1525 ALEXANDER WAY CLEARWATER FL 33756</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>59-3479518</b>	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent <b>MILES, NONA 1525 ALEXANDER WAY CLEARWATER FL 33756</b>			7. Name and Address of New Registered Agent		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable)			Street Address (P.O. Box Number is Not Acceptable)		
City			City		
FL			Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____					
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
				<b>Make Check Payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MILES, NONA		NAME		
STREET ADDRESS	1525 ALEXANDER WAY		STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL 33756	<b>PRESIDENT</b>	CITY-ST-ZIP		
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MICELLI, CARLO		NAME		
STREET ADDRESS	1821 ALEXANDER WAY		STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL		CITY-ST-ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GULLIFER, ROBERT		NAME		
STREET ADDRESS	1341 ALEXANDER WAY		STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL 33756	<b>TREASURER</b>	CITY-ST-ZIP		
TITLE	SECRETARY	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	Michael Kirkpatrick		NAME		
STREET ADDRESS	1230 Alexander Way		STREET ADDRESS		
CITY-ST-ZIP	Clearwater, FL 33756		CITY-ST-ZIP		
TITLE	James Cousins	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	1400 Alexander Way		NAME		
STREET ADDRESS	Clearwater FL 33756	<b>ASST SECRETARY</b>	STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	Deborah Schroeder	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	1320 Alexander Way		NAME		
STREET ADDRESS	Clearwater, FL 33756	<b>VICE PRESIDENT</b>	STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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 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: <u>Nona Miles</u> <b>NONA MILES</b>			3/15/04 727-585-0087		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		