


2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 735981 1. Entity Name BROOKVIEW ASSOCIATION, INC.			
Principal Place of Business 13500 NE 3RD COURT #227 NORTH MIAMI, FL 33161 US		Mailing Address 13500 NE 3RD COURT #227 NORTH MIAMI, FL 33161 US	
2. Principal Place of Business <i>14411 Commerce Way</i> Suite, Apt. #, etc. <i>240</i>		3. Mailing Address <i>14411 Commerce Way</i> Suite, Apt. #, etc. <i>240</i>	
City & State <i>Miami Lakes, FL</i>		City & State <i>Miami Lakes, FL</i>	
Zip <i>33016</i>	Country <i>Miami Dade</i>	Zip <i>33016</i>	Country <i>Miami Dade</i>
6. Name and Address of Current Registered Agent DOYLE, SUSAN 13500 NE 3RD CT #323 NORTH MIAMI, FL 33161		7. Name and Address of New Registered Agent Name <i>Jorge Zarate, C.A.H.</i> Street Address (P.O. Box Number is Not Acceptable) <i>C/O Cosmos Management Services Inc</i> <i>14411 Commerce Way, Suite 240</i> City <i>Miami Lakes</i> FL Zip Code <i>33016</i>	
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 <i>Jorge Zarate, C.A.H.</i> DATE <i>8/15/06</i> <small>Signature, typed or printed name of registered agent and sufficient applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DOYLE, JOHN 13500 NE 3RD CT #323 NO MIAMI, FL 33161	<input checked="" type="checkbox"/> Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DIXON, JANET 13500 NE 3RD CT MIAMI, FL 33161	<input checked="" type="checkbox"/> Delete	P Hazelton John 6051 NW 201 Lane Miami, FL 33015
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T CEASAR, REMUS 13500 NE 3RD CT #305 NO MIAMI, FL 33161	<input type="checkbox"/> Delete	VP Veronica Ross-Williams 13500 N.E. 3rd Court #406 N. Miami, FL 33161
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FISCHER, ADAM 13500 NE 3 CT #420 MIAMI, FL 33161	<input checked="" type="checkbox"/> Delete	S Mary Constance-Faison 13500 NE 3rd Court #206 N. Miami, FL 33161
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAZELTON, JOHN 6051 NW 201 LANE MIAMI, FL 33015	<input checked="" type="checkbox"/> Delete	D Deberly Rodriguez 13500 NE 3rd Court #225 N. Miami, FL 33161
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
000079733570 09/12/06--01066--012 **\$61.25			
<i>9/11</i>			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>John C. Hazelton Jr.</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <i>8/15/06</i> <small>Date</small>	
Daytime Phone #		Daytime Phone #	