

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23487

Entity Name: BROOKER TRACE SUBDIVISION HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**2614 BROOKER TRACE LN
VALRICO, FL 33596**Current Mailing Address:**2614 BROOKER TRACE LN
VALRICO, FL 33596 US**FEI Number:** 65-0156867**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WATKINS, DARYL
2614 BROOKER TRACE LN
VALRICO, FL 33596 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**Officer/Director Detail :**

Title	P
Name	SAUSAMAN, GREG
Address	2607 BROOKER TRACE LN
City-State-Zip:	VALRICO FL 33596
Title	S/D
Name	ASARO, CHRIS
Address	2616 BROOKER TRACE LANE
City-State-Zip:	VALRICO FL 33596

Title	VP
Name	RAGGHianti, PATTI
Address	2606 BROOKER TRACE LN
City-State-Zip:	VALRICO FL 33596
Title	T
Name	WATKINS, DARYL
Address	2614 BROOKER TRACE LN
City-State-Zip:	VALRICO FL 33596

I hereby 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 all other like empowered.

SIGNATURE: DARYL WATKINS**TRESURER****03/29/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date