2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2008
Secretary of State

DOCUMENT# 746556

Entity Name: BROOKFIELD GARDENS NORTH MASTER ASSOCIATION, INC.

Current Principal Place of Business:

700 S.E. 2ND AVE
#415
DEERFIELD BEACH, FL 33441 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8730
DEERFIELD BEACH, FL 33443 US

New Mailing Address:

FEI Number: 59-2019664 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RATLIFF, CARY L
700 S.E. 2ND AVE.
#415
DEERFIELD BEACH, FL 33441 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title:	VP	( ) Delete
Name:	SHEEHEN, GRETCHEN	
Address:	702 SE 2ND AVE. #408	
City-St-Zip:	DEERFIELD BCH, FL 33441	
Title:	PD	( ) Delete
Name:	RATLIFF, CARY L	
Address:	700 SE 2ND AVE., #415	
City-St-Zip:	DEERFIELD BCH, FL 33441	
Title:	SD	( ) Delete
Name:	JIMENEZ, ANGELA	
Address:	700 SE 2ND AVE. #414	
City-St-Zip:	DEERFIELD BCH, FL 33441	
Title:	D	(X) Delete
Name:	PEREIRA-SEPTIMO, OLGA	
Address:	22415 S.W. 61ST WAY #102	
City-St-Zip:	BOCA RATON, FL 33428	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify 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: CARY RATLIFF RA 02/07/2008

Electronic Signature of Signing Officer or Director — Date