2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#759194

FILED Feb 28, 2007 Secretary of State

Entity Name: BRIARWOOD MANOR HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 110 BRIARWOOD LANE COCOA, FL 32926 **Current Mailing Address: New Mailing Address:** 110 BRIARWOOD LANE COCOA, FL 32926 FEI Number: 59-2888683 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STEWART, RENE 110 BRIARWOOD LANE COCOA, FL 32926 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete LOADHOLTZ, LOWELL EISLER, ANDREW Name: Name: 111 BRIARWOOD LN Address: 112 BRIARWOOD LN Address: City-St-Zip: COCOA, FL 32926 City-St-Zip: COCOA, FL 32926 Title: () Delete Title: (X) Change () Addition HAM, MITON Name: HAM, MILTON Name: Address: 122 BRIARWOOD LN Address: 122 BRIARWOOD LN City-St-Zip: COCOA, FL 32926 City-St-Zip: COCOA, FL 32926 Title: () Delete Title: (X) Change () Addition MERCADANTE, RENA SWONGER, JAMES Name: Name: 108 BRIARWOOD LN 3795 NORTH INDIAN RIVER DR. Address: Address: City-St-Zip: COCOA, FL 32926 City-St-Zip: COCOA, FL 32926 Title: () Delete Title: (X) Change () Addition Name: CADDELL, ED Name: CUNNINGHAM, HARRELL 124 BRIARWOOD CT 125 BRIARWOOD CT Address: Address: City-St-Zip: COCOA, FL 32926 City-St-Zip: COCOA, FL 32926 Title: () Delete Title: () Change () Addition SELLARS, ROBERT Name: Name: 113 BRIARWOOD LN Address: Address: City-St-Zip: COCOA, FL City-St-Zip: Title: () Delete Title: () Change () Addition STEWART, RENE' Name: Name: Address: 110 BRIARWOOD LANE Address: COCOA, FL 32926 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: RENE STEWART S 02/28/2007