## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 770598**

FILED Feb 03, 2007 Secretary of State

Entity Name: BROOKSIDE TOWNHOMES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4285 BROOKSIDE DRIVE 850-439-3446 PENSACOLA, FL 32503 US **New Mailing Address: Current Mailing Address:** 4285 BROOKSIDE DRIVE PENSACOLA, FL 32503 US FEI Number: 59-2377247 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: BRYANT, DAVID J CPA 916 BROOKSIDE PLACE PENSACOLA, FL 32503 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition LOWE, GERRI HOMMER, BELINDA Name: Name: 4276 BROOKSIDE DRIVE Address: 4272 BROOKSIDE DRIVE Address: City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: PENSACOLA, FL 32503 (X) Change ( ) Addition Title: () Delete Title: KLIMUSZKO, FAYE Name: CIVELLI, PATRICIA Name: Address: 4213 BROOKSIDE DRIVE Address: 4268 BROOKSIDE DRIVE City-St-Zip: PENSACOLA, FL 32503 US City-St-Zip: PENSACOLA, FL 32503 US Title: () Delete Title: () Change () Addition BRYANT, DAVID J CPA Name: Name: 916 BROOKSIDE PLACE Address: Address: City-St-Zip: PENSACOLA, FL 32503 US City-St-Zip: Title: SD ( ) Delete Title: () Change () Addition Name: ADAMS, JOANNE Name: 4266 BROOKSIDE DRIVE Address: Address: City-St-Zip: PENSACOLA, FL 32503 US City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition HAWTHORNE, DAWN HAYES, WILLIAM Name: Name: 4279 BROOKSIDE DRIVE 918 BROOKSIDE COURT Address: Address: City-St-Zip: PENSACOLA, FL 32503 US City-St-Zip: PENSACOLA, FL 32503 US Title: () Delete Title: () Change () Addition MCDOWELL, ANNIE C Name: Name: Address: 4239 BROOKSIDE DRIVE Address: PENSACOLA, FL 32503 US 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: DAVID J. BRYANT, CPA TRES 02/03/2007