2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770598

FILED Mar 04, 2009 Secretary of State

Entity Name: BROOKSIDE TOWNHOMES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 4285 BROOKSIDE DRIVE 4285 BROOKSIDE DRIVE 850-439-3446 PENSACOLA, FL 32503 US 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 () Change () Addition GUADAGNI, ROBERT T Name: Name: 4272 BROOKSIDE DRIVE Address: Address: City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: Title: () Delete Title: VPD (X) Change () Addition HOMMER, BELINDA Name: HOOPER, BETTY Name: Address: 4262 BROOKSIDE DRIVE Address: 2811 OAK RIDGE DRIVE City-St-Zip: PENSACOLA, FL 32503 US City-St-Zip: GULF BREEZE, FL 32563 US Title: () Delete Title: TD (X) Change () Addition BRYANT, DAVID J CPA NEALEY, DAVID Name: Name: 916 BROOKSIDE PLACE 4272 BROOKSIDE DRIVE Address: Address: City-St-Zip: PENSACOLA, FL 32503 US City-St-Zip: PENSACOLA, FL 32503 US Title: SD () Delete Title: SD (X) Change () Addition Name: HOOPER, BETTY Name: KLECKNER, GARTH 2811 OAK RIDGE DRIVE 4258 BROOKSIDE DRIVE Address: Address: City-St-Zip: GULF BREEZE, FL 32563 US City-St-Zip: PENSACOLA, FL 32503 US Title: () Delete Title: (X) Change () Addition CIVELLI, PATRICIA ADAMS, JOANNE Name: Name: 4268 BROOKSIDE DRIVE 4266 BROOKSIDE DRIVE 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 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 RA 03/04/2009