


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 18, 2005 08:00 AM
Secretary of State

DOCUMENT # F76755 1. Entity Name BROOKRIDGE WEST REALTY, INC.		
Principal Place of Business 7268 BROOKRIDGE CENTRAL BLVD BROOKSVILLE, FL 34613		Mailing Address 7268 BROOKRIDGE CENTRAL BLVD BROOKSVILLE, FL 34613
DO NOT WRITE IN THIS SPACE		
5. Name and Address of Current Registered Agent DALY, MICHAEL J. 8502 VAN DYKE ROAD ODESSA, FL 33556		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SDP DALY, MICHAEL J 8502 VAN DYKE ROAD ODESSA, FL	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS DALY, AUDREY ANN 8502 VAN DYKE ROAD ODESSA, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V TOEPPE, JEANETTE R. 10146 SWANSON CT. SPRING HILL, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <i>Audrey Daly Sec/Treas</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <i>3/11/05</i> Daytime Phone # <i>813 920 7371</i>



01042005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2190896	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

UN00000269013
03/18/05-80066-006 150.00