

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 12, 2006 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**



01052006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2190896**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

**6. 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 \_\_\_\_\_

(If dual listed or listed as agent and filer, sign both.)

(If OTE, Registered Agent's signature required when re-staffing)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$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**

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

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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01/12/06-80031-002 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

*Audrey Daly, Sec.*

DATE

*1/10/06*

*813 9207371*  
Daytime Phone