

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90104 013 ****70.00

0019762

DOCUMENT # N01000000113

1. Entity Name

BROOKWOOD FLORIDA-EAST, INC.

Principal Place of Business

11461 N.W. 43RD STREET
 CORAL SPRINGS FL 33065-7180

Mailing Address

11461 N.W. 43RD STREET
 CORAL SPRINGS FL 33065-7180

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

901 - 7th Ave. So.

ST. Petersburg, FL.

33705



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1072214

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MESMER, PAMELA J
901 SEVENTH AVENUE SOUTH
ST. PETERSBURG FL 33705

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	Delete
NAME	PISCITELLI, EARLINE K	
STREET ADDRESS	14898 FEATHER COVE RD.	
CITY-ST-ZIP	CLEARWATER FL 33762	
TITLE	D	Delete
NAME	STRAIN, WALTER	
STREET ADDRESS	169 ILLINOIS AVENUE, N.E.	
CITY-ST-ZIP	ST. PETERSBURG FL 33793	
TITLE	D	Delete
NAME	MELLENEY, LINDA B	
STREET ADDRESS	P.O. BOX 565	
CITY-ST-ZIP	ST. PETERSBURG FL 33731	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Peck, David C/O	Change	Addition
NAME			
STREET ADDRESS	350 E. Las Olas Blvd.		
CITY-ST-ZIP	Suite 1600 Ft. Lauderdale 33301		
TITLE	T/O	Change	Addition
NAME	Aitieri, Jan		
STREET ADDRESS	451 SW 132 Ave		
CITY-ST-ZIP	DAVID, FL 33325		
TITLE	D	Change	Addition
NAME	Mesmer, Pam		
STREET ADDRESS	901 - 7th Ave. So		
CITY-ST-ZIP	St. Petersburg, FL 33705		
TITLE	D	Change	Addition
NAME	Cadd, Lisa		
STREET ADDRESS	901 - 7th Ave. So.		
CITY-ST-ZIP	St. Petersburg, FL 33705		
TITLE	D	Change	Addition
NAME	Brown, Terri		
STREET ADDRESS	901 - 7th Ave. So.		
CITY-ST-ZIP	St. Petersburg, FL 33705		
TITLE		Change	Addition
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)(i), 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 617, 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: *Terri Brown* **SIGNATURE REQUIRED: J. Brown Business Director** (727) 822-4789 x16 3/30/02

CR2E037 (9/01)