

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002055

FILED
Feb 28, 2008
Secretary of State

Entity Name: BRIAN'S POND HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3311 BRIAN'S POND DR
PLANT CITY, FL 33566 US

New Principal Place of Business:

3310 BRIANS POND DRIVE
PLANT CITY, FL 33566 US

Current Mailing Address:

3311 BRIAN'S POND DR
PLANT CITY, FL 33566 US

New Mailing Address:

3310 BRIANS POND DRIVE
PLANT CITY, FL 33566 US

FEI Number: 59-3710223

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAINARD, DEBORAH
3311 BRIAN'S POND DR
PLANT CITY, FL 33566 US

Name and Address of New Registered Agent:

SALVATOR, PAUL
3310 BRIANS POND DRIVE
PLANT CITY, FL 33566 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: PAUL SALVATOR

02/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SALVATOR, PAUL
Address: 3310 BRIAN'S POND DR
City-St-Zip: PLANT CITY, FL 33566

Title: VP () Delete
Name: DUNBAR, BARBARA
Address: 3319 BRIAN'S POND DR
City-St-Zip: PLANT CITY, FL 33566

Title: ST (X) Delete
Name: RAINARD, DEBORAH
Address: 3311 BRIAN'S POND DR
City-St-Zip: PLANT CITY, FL 33566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SALVATOR, PAUL
Address: 3310 BRIAN'S POND DR
City-St-Zip: PLANT CITY, FL 33566

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: PAUL SALVATOR

PRES

02/28/2008

Electronic Signature of Signing Officer or Director

Date