2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003372

FILED Apr 23, 2009 Secretary of State

Entity Name: BRENTWOOD OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

908 GARDENGATE CIRCLE PENSACOLA, FL 32504

Current Mailing Address: New Mailing Address:

908 GARDENGATE CIRCLE PENSACOLA, FL 32504

FEI Number: 59-3746322 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:

ETHENRIDGE, KEVIN POSS GARDENGATE CIRCLE PENSACOLA, FL 32504 US ETHERIDGE, KEVIN R POSS GARDENGATE CIRCLE PENSACOLA, FL 32504 US PENSACOLA, FL 32504 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: KEVIN R. ETHERIDGE 04/23/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P ()Delete Title: PD (X)Change ()Addition

Name: SOOT, MILLER Name: MILLER, SCOTT
Address: 5021 BROOKSIDE DR. Address: 5021 BROOKSIDE DRIVE

City-St-Zip: PACE, FL 32571 City-St-Zip: PACE, FL 32571

Title: VP () Delete Title: VPD (X) Change () Addition Name: PIACO, JILL Name: DIACO, JILL

Address: 5115 BROOKSIDE DR. Address: 5115 BROOKSIDE DRIVE

City-St-Zip: PACE, FL 32571 City-St-Zip: PACE, FL 32571

Title: ST () Delete Title: D (X) Change () Addition

Name:CAPEN, GARYName:NARVESEN, JOHNAddress:4901 PINEVIEW RIDGE RD.Address:5073 BROOKSIDE DRIVE

City-St-Zip: PACE, FL 332571 City-St-Zip: PACE, FL 32571

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: KEVIN R. ETHERIDGE RA 04/23/2009