## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N01000005980

Title:

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TI FILED

Aug 17, 2007

Secretary of State

Entity Name: BRANNAN MILL PLANTATION HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** AWAKENINGS ASSOCIATION MANAGEMENT, INC. 4213 COUNTY ROAD 218 SUITE 1 MIDDLEBURG, FL 32068 **New Mailing Address: Current Mailing Address:** BRANNAN MILL PLANTATION HOMEOWNERS' 4213 COUNTY ROAD 218 SUITE 1 MIDDLEBURG, FL 32068 FEI Number: 59-3742411 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: DELCOMYN, VINA C 4759 LEOPARD CIRCLE MIDDLEBURG, FL 32068 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition LEWIS, LESLIE Name: Name: 1784 SAW LAKE DR Address: Address: City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: Title: ( ) Delete Title: DVP (X) Change ( ) Addition RODRIGUEZ, HECTOR Name: RODRIGUEZ, HECTOR Name: Address: 1807 SAW LAKE DR Address: 1807 SAW LAKE DR City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: MIDDLEBURG, FL 32068 Title: DS () Delete Title: () Change () Addition POTTER, MARIANNE Name: Name: 1864 PINETA COVE DRIVE Address: Address: City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: Title: DT ( ) Delete Title: () Change () Addition Name: PUTNAM, FRANK Name: 1821 HEARTPINE DRIVE Address: Address: City-St-Zip: MIDDLEBURG, FL 32068 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

Title:

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Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

SIGNATURE: WILLIAM CAVANAUGH PD 08/17/2007

above, or on an attachment with an address, with all other like empowered.

() Delete

() Delete

DUCHARME, GREG

1802 HEARTPINE DR

MIDDLEBURG, FL 32068

CAVANAUALT, WILLIAM

1804 HEARTPINE DRIVE

MIDDLEBURG, FL 32068

(X) Change ( ) Addition

(X) Change ( ) Addition

RICK, SMITH

4150 WEATHERED PINE CT

MIDDLEBURG, FL 32068

CAVANAUGH, WILLIAM

1804 HEARTPINE DRIVE MIDDLEBURG, FL 32068