2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N01000005980

RT FILED Jun 17, 2009 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 DELCOMYN, VINA C 4213 COUNTY RD 218 SUITE 1 4759 LEOPARD CIRCLE MIDDLEBURG, FL 32068 US MIDDLEBURG, FL 32068

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: VINA C. DELCOMYN 06/17/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition RODRIGUEZ, HECTOR MILLICAN, CAROL Name: Name: 1807 SAW LAKE DR Address: 4213 COUNTY RD 218, SUITE 1 Address: City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: MIDDLEBURG, FL 32068 Title: STD () Delete Title: (X) Change () Addition POTTER, MARIANNE Name: OTTOMEYER, RUTH Name: Address: 1864 PINETA COVE DRIVE Address: 4213 COUNTY RD 218 SUITE 1 City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: MIDDLEBURG, FL 32068 Title: VPD

() Delete Title: **TREA** (X) Change () Addition

RICK, SMITH APPLETON, LORI Name: Name:

4150 WEATHERED PINE CT 4213 COUNTY RD 218 SUITE 1 Address: Address: City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: MIDDLEBURG, FL 32068

Title: () Delete Title: SEC () Change (X) Addition BRAVO, JONNÍ Name: Name:

4213 COUNTY RD 218 SUITE 1 Address: Address: City-St-Zip: City-St-Zip: MIDDLEBURG, FL 32068

Title: () Delete Title: ROD () Change (X) Addition

GUSSLER, JON Name: Name:

4213 COUNTY RD 218 SUITE 1 Address: Address: City-St-Zip: City-St-Zip: MIDDLEBURG, FL 32068

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: VINA C. DELCOMYN CAM 06/17/2009