

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007376

FILED  
Apr 05, 2005  
Secretary of State

Entity Name: BRENTWOOD OFFICE PARK CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3116 CAPITAL CIRCLE, N.E.  
10  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

3116 CAPITAL CIRCLE, N.E.  
10  
TALLAHASSEE, FL 32308

**New Mailing Address:**

FEI Number: 59-3751550      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MINNICK, JOHN A  
3116 CAPITAL CIRCLE, N.E.  
#10  
TALLAHASSEE, FL 32308 US

**Name and Address of New Registered Agent:**

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:**

Title: PDT ( ) Delete  
Name: MINNICK, BRUCE  
Address: 3116 CAPITAL CIRCLE, N.E., STE. 10  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: DAWS, SONYA  
Address: 3116 CAPITAL CIRCLE, N.E., STE. 5  
City-St-Zip: TALLAHASSEE, FL 32308

Title: DS ( ) Delete  
Name: COX, JERRY  
Address: 3116 CAPITAL CIR NE STE 2  
City-St-Zip: TALLAHASSEE, FL 32308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MINNICK, BRUCE A  
Address: 3116 CAPITAL CIRCLE, N.E., STE. 10  
City-St-Zip: TALLAHASSEE, FL 32308

Title: DS (X) Change ( ) Addition  
Name: MINNICK, JOHN A  
Address: 3116 CAPITAL CIRCLE, N.E., STE. 10  
City-St-Zip: TALLAHASSEE, FL 32308

Title: DT (X) Change ( ) Addition  
Name: COX, JERRY  
Address: 3116 CAPITAL CIRCLE, N.E., STE 2  
City-St-Zip: TALLAHASSEE, FL 32308

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BRUCE A MINNICK

PRES

04/05/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date