

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001975

FILED
Apr 27, 2009
Secretary of State

Entity Name: BRANDON FORREST RESERVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5522 NW 43RD ST
SUITE B
GAINESVILLE, FL 32653

New Principal Place of Business:

Current Mailing Address:

5522 NW 43RD ST
SUITE B
GAINESVILLE, FL 32653

New Mailing Address:

FEI Number: 51-0424735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRADY, SARAH
C/O BOSSHARDT PROPERTY MGT.
5522-B N.W. 43RD STREET
GAINESVILLE, FL 32653 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: PD () Delete
Name: COANE, RICHARD
Address: 2916 FOREST RESERVE PL
City-St-Zip: SEFFNER, FL 33584

Title: D () Delete
Name: TAYLOR, MIKE
Address: 2934 FOREST RESERVE PL.
City-St-Zip: SEFFNER, FL 33584

Title: TD () Delete
Name: HEMSLEY, KEITH
Address: 2935 FOREST RESERVE PL
City-St-Zip: SEFFNER, FL 33584

Title: DV () Delete
Name: WAYNE, DAVID
Address: 2918 FOREST RESERVE PL
City-St-Zip: SEFFNER, FL 33584

Title: SD () Delete
Name: SHIMKES, CRAIG
Address: 2906 FOREST RESERVE PL.
City-St-Zip: SEFFNER, FL 33584

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: RICHARD COANE

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date