2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

May 21, 2007 8:00 am Secretary of State DOCUMENT # N02911 1. Entity Name 05-21-2007 90051 040 ****61.25 BROOKWOOD SUBDIVISION THIRD ADDITION HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address JUNE L. DALL JUNE L. DALL 2 MAYFIELD TERRACE ORMOND BEACH FL 32174 2 MAYFIELD TERRACE ORMOND BEACH FL 32174 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. EEI Number Applied For 59-2698856 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DALL, JUNE L Street Address (P.O. Box Number is Not Acceptable) 2 MAYFIELD TERRACE ORMOND BEACH FL 32174 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstaling) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE SD TITLE SD ☐ Change Delete X Addition NAMI. SCHULMAN, PAM NAME Robin Freedman STREET ADDRESS 46 MAYFIELD TERRACE STREET ADDRESS 4 Mayfiled Terrace CITY-S1-ZIP CHY-S1-7IP ORMOND BEACH FL 32174 Ormond Beach, Fl. 32174 TITLE PD Delete TITLE ☐ Change X Addition NAME FREEDMAN, IRA NAME Schulman, Neal STREET ADDRESS 4 MAYFIELD TERRACE STREET ADDRESS 46 Mayfield Terrace C!TY-ST-ZIP ORMOND BEACH FL 32174 CITY-ST-ZIP Ormond Beach, Fl. 32174 X Addition VD X Delele TITLE ☐ Change NAME GERWIG, CHARLES NAME Frage, Bert 41 Mayfield Terrace STREET ADDRESS 12 MAYFIELD TERRACE STREET ADDRESS CITY-ST-7IP CITY-ST-7IP Ormond Beach, Fl. 32174 ORMOND BEACH FL 32174 THE TITLE Change **★** Addition □ Delete Murray, DAniel 58 Mayfield Terrace NAME NAME DALL, JUNE L STREEL ADDRESS STREET ADDRESS 2 MAYFIELD TERRACE CITY - ST- ZIP CITY-ST-ZIP Ormond Beach, Fl. 32174 ORMOND BEACH FL 32174 X Addition Delete TITLE ☐ Change Subacius, Ron 54 Mayfield Terrace GARDENER, IRIS NAME STREET ADDRESS STREET ADDRESS 10 MAYFIELD TERRACE Ormond Beach, Fl. 32174 CITY - ST-74P ORMOND BEACH FL 32174 CITY-S1-ZIP THIF ☐ Change Addition TIME Delete VanLancker, L.J. NAME SAUSE, HANNA NAME 60 Mayfield Terrace STREET ADDRESS STREET ADDRESS **48 MAYFIELD TERRACE** CITY-ST-ZIP CITY-ST-ZIP ORMOND BEACH FL 32174 Ormond Beach, Fl. 32174

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same logal effect as if made under eath; that I am an efficer 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CICNATUDE June I. Dall

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4-25-07

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