

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 10, 2007 8:00 am**  
**Secretary of State**

05-10-2007 90024 031 \*\*\*\*61.25

<b>DOCUMENT # N03000002165</b> 1. Entity Name <b>BRANDON CROSSROADS ASSOCIATION, INC.</b>			
Principal Place of Business %KENNEDY FROST INVESTMENTS, INC. 2910 BAY TO BAY BLVD, STE 200 TAMPA, FL 33629-8113		Mailing Address %KENNEDY FROST INVESTMENTS, INC. 2910 BAY TO BAY BLVD, STE 200 TAMPA, FL 33629-8113	
2. Principal Place of Business - No P.O. Box # <b>BRANDON CROSSROADS ASSOC INC</b>		3. Mailing Address <b>BRANDON CROSSROADS ASSOC INC</b>	
Suite, Apt. #, etc. <b>8713 CREST LANE</b>		Suite, Apt. #, etc. <b>8713 CREST LANE</b>	
City & State <b>FORT MYERS</b>		City & State <b>FORT MYERS</b>	
Zip <b>33907</b>		Zip <b>33907</b>	
Country <b>LEE</b>		Country <b>LEE</b>	
6. Name and Address of Current Registered Agent  <b>SMITH, W. LAWRENCE</b> <b>101 E KENNEDY BLVD, STE 3700</b> <b>TAMPA, FL 33602</b>		7. Name and Address of New Registered Agent Name <b>PAULA JEAN WORMUTH</b> Street Address (P.O. Box Number is Not Acceptable) <b>8713 CREST LANE</b> City <b>FORT MYERS</b> <b>FL</b> Zip Code <b>33907</b>	
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: <i>Paula Jean Wormuth</i> DATE: <b>4/23/2007</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
Make check payable to <b>Florida Department of State</b>			
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KENNEDY, DAVID A 2910 W BAY TO BAY BLVD, STE 200 TAMPA, FL-33629	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT ERIN BOHACEK 2910 W. BAY TO BAY BLVD, STE 200 TAMPA, FL 33629
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TYSZKOY, JOSEPH 2910 W BAY TO BAY BLVD, STE 200 TAMPA, FL 33629	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT JOHN E. LAUTEMANN 22130 SHALLOWS LANE BONITA SPRINGS, FL 34135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JENKINS, DONNA 2910 W BAY TO BAY BLVD, STE 200 TAMPA, FL 33629	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY ERIN BOHACEK 2910 BAY TO BAY BLVD, STE 200 TAMPA, FLORIDA 33629
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER JOHN E. LAUTEMANN 22130 SHALLOWS LANE BONITA SPRINGS, FL 34135
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Paula Jean Wormuth, CAM</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: <b>4/23/2007</b> Phone: <b>278-3742</b> <small>Date Daytime Phone #</small>	

*Brandon Crossroads Association, Inc.*