2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002165

FILED Jan 07, 2009 Secretary of State

Entity Name: BRANDON CROSSROADS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

BRANDON CROSSROADS ASSOC. INC 8713 CREST LANE FORT MYERS, FL 33907

Current Mailing Address: New Mailing Address:

BRANDON CROSSROADS ASSOC. INC 8713 CREST LANE FORT MYERS, FL 33907

FEI Number: 20-0856143 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:

WORMUTH, PAULA J 8713 CREST LANE FORT MYERS, FL 33907 US

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:

Flacture Complete of Davidson I Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: BOHACEK, ERIN BOHACEK, ERIN

Address: 2910 W BAY TO BAY BLVD, STE 200 Address: 3410 HENDERSON BLVD. STE 200

City-St-Zip: TAMPA, FL 33629 City-St-Zip: TAMPA, FL 33609

Title: VT () Delete Title: () Change () Addition

 Name:
 LAUTEMANN, JOHN E
 Name:

 Address:
 22130 SHALLOWATER LANE
 Address:

 City-St-Zip:
 BONITA SPRINGS, FL 34135
 City-St-Zip:

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

Name: BONACEK, ERIN Name: BOHACEK, ERIN

Address: 2910 BAY TO BAY BLVD, STE 200 Address: 3410 HENDERSON BLVD. STE 200

City-St-Zip: TAMPA, FL 33629 City-St-Zip: TAMPA, FL 33609

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: ERIN BOHACEK P 01/07/2009