## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000004000

FILED Mar 11, 2009 Secretary of State

Entity Name: APARTMENTS AT BRIGHTON PARK CONDOMINIUM ASSOCIATION, INC.

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

4415 SW 34TH ST GAINESVILLE, FL 32608

Current Mailing Address: New Mailing Address:

C/O ACTION REAL ESTATE SERVICES 6110-B NW 1ST PL GAINESVILLE, FL 32607

FEI Number: 20-0029959 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:

SAUSAMAN, JEFFREY
C/O ACTION REAL ESTATE SERVICES
6110-B NW 1ST PL
GAINESVILLE, FL 32607 US

ACTION REAL ESTATE SERVICES
6110-B NW 1ST PL
GAINESVILLE, FL 32607 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: D JEFFREY SAUSAMAN 03/11/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D ( ) Delete Title: DP (X) Change ( ) Addition

 Name:
 AHRENS, GARY
 Name:
 AHRENS, GARY

 Address:
 4905 SE 4TH ST
 Address:
 4905 SE 4TH ST

 City-St-Zip:
 OCALA, FL 34471
 City-St-Zip:
 OCALA, FL 34471

Title: PD ( ) Delete Title: DS (X) Change ( ) Addition

 Name:
 ORTIZ, CINDY
 Name:
 MCDOWELL, TARA

 Address:
 4415 SW 34TH ST #204
 Address:
 4415 SW 34TH ST #203

 City-St-Zip:
 GAINESVILLE, FL 32608
 City-St-Zip:
 GAINESVILLE, FL 32608

 $\label{eq:title:D} {\sf Title:} \qquad {\sf SD} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

Name: GONZALEZ, NATASHA Name: ROSIN, ERIN

 Address:
 4415 SW 34TH ST #502
 Address:
 4415 SW 34TH ST #404

 City-St-Zip:
 GAINESVILLE, FL 32607
 City-St-Zip:
 GAINESVILLE, FL 32607

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: GARY AHRENS P 03/11/2009