

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008626

FILED  
Feb 21, 2007  
Secretary of State

**Entity Name:** FIRSTPARK AT BRANDON BUSINESS CENTER OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

19001 SUNLAKE BLVD.  
LUTZ, FL 335584949 US

**New Principal Place of Business:**

**Current Mailing Address:**

19001 SUNLAKE BLVD.  
LUTZ, FL 335584949 US

**New Mailing Address:**

**FEI Number:** 65-1246544

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BARTOLETTA, JAMES M  
19001 SUNLAKE BLVD.  
LUTZ, FL 335584949 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: COHEN, JEFFREY  
Address: 575 UNDERHILL BLVD., SUITE 125  
City-St-Zip: SYOSSET, NY 11791 US

Title: TD ( ) Delete  
Name: BARTOLETTA, JAMES M  
Address: 19001 SUNLAKE BLVD.  
City-St-Zip: LUTZ, FL 335584949 US

Title: SD ( ) Delete  
Name: DAVIS, STACEY  
Address: 7095 HOLLYWOOD BLVD.; # 665  
City-St-Zip: LOS ANGELES, CA 90028 US

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES M BARTOLETTA

TD

02/21/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date