
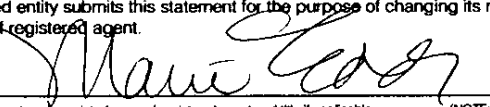
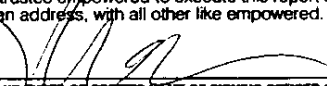


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008 8:00 am
Secretary of State

01-31-2008 90016 005 ****61.25

DOCUMENT # N04000008666					
1. Entity Name BRIGHTON PLACE CONDOMINIUMS ASSOCIATION, INC.					
Principal Place of Business 1575 PAUL RUSSELL RD TALLAHASSEE, FL 32301			Mailing Address 7113 BEECH RIDGE TRAIL SUITE 1 TALLAHASSEE, FL 32312		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address 1607 Village Sq. Blvd		
Suite, Apt. #, etc.			Suite, Apt. #, etc. Suite 8		
City & State			City & State Tallahassee, FL		
Zip	Country		Zip	Country	
32309	USA		32309	USA	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
EDDY, MARIE 7143 BEECH RIDGE TRAIL SUITE 1 TALLAHASSEE, FL 32312			Name EDDY, MARIE		
			Street Address (P.O. Box Number is Not Acceptable) 1607 VILLAGE SQUARE BLVD		
			Suite Suite 8		
			City Tallahassee FL Zip Code 32309		
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  DATE 1/28/08					
(NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2008			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	DV	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GHAVINI, HOSSEIN		NAME	ANDERSON, SALLY	
STREET ADDRESS	2811-E INDUSTRIAL PLAZA		STREET ADDRESS	1575 PAUL RUSSELL RD # 301	
CITY-ST-ZIP	TALLAHASSEE, FL 32301		CITY-ST-ZIP	TALLAHASSEE, FL 32301	
TITLE	S	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GHAVINI, BEHZAD		NAME	WILDER, RALPH	
STREET ADDRESS	2811-E INDUSTRIAL PLAZA		STREET ADDRESS	1575 PAUL RUSSELL RD # 4404	
CITY-ST-ZIP	TALLAHASSEE, FL 32301		CITY-ST-ZIP	TALLAHASSEE, FL 32301	
TITLE	T	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GHAVINI, MEHRAN		NAME		
STREET ADDRESS	2811-E INDUSTRIAL PLAZA		STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE, FL 32301		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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:  DATE 1/28/08 DAYTIME PHONE # 894-1919					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					