

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008666

FILED
Mar 31, 2009
Secretary of State

Entity Name: BRIGHTON PLACE CONDOMINIUMS ASSOCIATION, INC.

Current Principal Place of Business:

1575 PAUL RUSSELL RD
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

1607 VILLAGE SQ. BLVD
SUITE 8
TALLAHASSEE, FL 32309

New Mailing Address:

FEI Number: 20-4659031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDDY, MARIE
1607 VILLAGE SQUARE BLVD
SUITE 8
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

EDDY, MARIE
1607 VILLAGE SQUARE BLVD
SUITE 8
TALLAHASSEE, FL 32309 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: MARIE EDDY

03/31/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: GHAZVINI, HOSSEIN
Address: 2811-E INDUSTRIAL PLAZA
City-St-Zip: TALLAHASSEE, FL 32301

Title: S () Delete
Name: GHAZVINI, BEHZAD
Address: 2811-E INDUSTRIAL PLAZA
City-St-Zip: TALLAHASSEE, FL 32301

Title: T () Delete
Name: GHAZVINI, MEHRAN
Address: 2811-E INDUSTRIAL PLAZA
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Delete
Name: ANDERSON, SALLY
Address: 1575 PALL RUSSELL RD #301
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Delete
Name: WILDER, RALPH
Address: 1575 PAUL RUSSEL RD. #4404
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change () Addition
Name: GHAZVINI, HOSSEIN
Address: 4708 CAPITAL CIRCLE NW
City-St-Zip: TALLAHASSEE, FL 32303

Title: S (X) Change () Addition
Name: GHAZVINI, BEHZAD
Address: 4708 CAPITAL CIRCLE NW
City-St-Zip: TALLAHASSEE, FL 32303

Title: T (X) Change () Addition
Name: GHAZVINI, MEHRAN
Address: 4708 CAPITAL CIRCLE NW
City-St-Zip: TALLAHASSEE, FL 32303

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 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: MARIE EDDY

MGR

03/31/2009

Electronic Signature of Signing Officer or Director

Date