


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

4) **FILED**
May 08, 2006 8:00 am
Secretary of State

04-20-2006 90179 024 ****61.25

DOCUMENT # N0500006067

1. Entity Name
BROOKFIELD PROFESSIONAL PARK OWNERS ASSOCIATION, INC.



Principal Place of Business
**16630 N DALE MABRY HWY
 TAMPA, FL 33618**

Mailing Address
**16630 N DALE MABRY HWY
 TAMPA, FL 33618**

66015262



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01192006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
05-1255177

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WESTFALL, JOHN
 16630 N DALE MABRY HWY
 TAMPA, FL 33618**

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
 Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$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 Delete
 NAME **DPST WESTFALL, JOHN W**
 STREET ADDRESS **16630 N DALE MABRY HWY**
 CITY-ST-ZIP **TAMPA, FL 33618**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D WESTFALL, CAROL**
 STREET ADDRESS **16630 N DALE MABRY HWY**
 CITY-ST-ZIP **TAMPA, FL 33618**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D MYERS, STEVEN L**
 STREET ADDRESS **13823 N FLORIDA AVE**
 CITY-ST-ZIP **TAMPA, FL 33613**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 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: Carol A Westfall, CAROL A. WESTFALL 4/14/06 (813) 962-6544
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
Waterford Properties & Real Estate, Inc.

18630 N. Dale Mabry Hwy.
Tampa, FL 33618-1400
4174

66015262

Telephone: (813) 962-6544
Fax: (813) 962-

May 4, 2006

Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Please note that the FEI numbers have been entered in Block 4 for the following Corporations:

Canterbury Professional Park Owners Association, Inc., Reference Number: N050000011057.

Covington Professional Park Owners Association, Inc. Reference Number: N05000006066.

Brookfield Professional Park Owners Association, Inc., Reference Number: N05000006067.

If you have any questions or need further information, please feel free to contact me at (813) 962-6544.

Sincerely,



Carol Westfall

CAW/caj