

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006246

FILED  
Apr 27, 2008  
Secretary of State

**Entity Name:** BRADISSEN PLACE CONDOMINIUM ASSN., INC.

**Current Principal Place of Business:**

901 NW 8TH AVE.  
SUITE A-6  
GAINESVILLE, FL 32609

**New Principal Place of Business:**

2070 SW 42ND LANE  
GAINESVILLE, FL 32608

**Current Mailing Address:**

901 NW 8TH AVE.  
SUITE A-6  
GAINESVILLE, FL 32609

**New Mailing Address:**

PO BOX 90154  
GAINESVILLE, FL 32607

**FEI Number:** 26-0120544

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILSON, SALLY ANN  
901 NW 8TH AVE. SUITE A-6  
4131 NW 13TH ST SUITE 207  
GAINESVILLE, FL 32609 US

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

NAYBOR, INC.  
2070 SW 42ND LANE  
GAINESVILLE, FL 32608 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: CRAIG PLEDGER

04/27/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SMITH, LINLEY  
Address: 3425 SW 29TH TERR SUITE A101  
City-St-Zip: GAINESVILLE, FL 32608

Title: V (X) Delete  
Name: PENA, JOAN  
Address: 3425 SW 29TH TERR SUITE A103  
City-St-Zip: GAINESVILLE, FL 32608

Title: ST (X) Delete  
Name: RETHANY, COOLEY  
Address: 3425 SW 29TH TERR SUITE A203  
City-St-Zip: GAINESVILLE, FL 32608

Title: T (X) Delete  
Name: HOLDER, KEITH  
Address: 3425 SW 29TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32608

Title: V ( ) Delete  
Name: PENA, AMBER  
Address: 3475 SW 29TH TER. SUITE A103  
City-St-Zip: GAINESVILLE, FL 32608

Title: ST ( ) Delete  
Name: COOLEY, BETHANY  
Address: 3425 SW 29TH TER. SUITE A203  
City-St-Zip: GAINESVILLE, FL 32608

**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:

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 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: CRAIG PLEDGER

CAM

04/27/2008

Electronic Signature of Signing Officer or Director

Date