2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 28, 2008 8:00 am
Secretary of State
05-01-2008 90228 028 ****61.25

DOCUMENT # N05000011245

1. Entity Name
BROOKSHIRE LANDING OWNERS ASSOCIATION, INC.

66012410

Principal Place of Business	Mailing Address
% CENTEX HOMES 6620 SOUTHPOINT DR. SOUTH, SUITE 400 JACKSONVILLE, FL 32216	% CENTEX HOMES 6620 SOUTHPOINT DR. SOUTH, SUITE 400 JACKSONVILLE, FL 32216

04282008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
475 W TOWN PLACE,	475 W TOWN PLACE,
Suite, Apt. #, etc. #100	Suite, Apt. #, etc. #100
City & State ST AUGUSTINE, FL	City & State ST AUGUSTINE, FL
Zip 32092 Country	Zip 32092 Country

4. FEI Number
86-1162941
☐ Applied For
☐ Not Applicable

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
SEVERN TRENT SERVICES 475 WEST TOWN PLACE STE 100 SAINT AUGUSTINE, FL 32092	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, 2008

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	DP PEERY, JASON 12740 GRAN BAY PARKWY SUITE 2400 JACKSONVILLE, FL 322584487	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STEPHANIE PAYNE - P 7212 RAMPART RIDGE CIR JAX, FL 32244	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP OPENSHAW, MARK 12740 GRAN BAY PARKWAY SUITE 2400 JACKSONVILLE, FL 32258	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ANTHONY SURLES - VP 7254 RAMPART RIDGE CIR JAX, FL 32244	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SDT TAYLOR, JASON 12740 GRAN BAY PARKWAY SUITE 2400 JACKSONVILLE, FL 32256	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ROBERT BROWN - S 7177 RAMPART RIDGE CIR JAX, FL 32244	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ROMELL BROWN - T 7278 RAMPART RIDGE CIR JAX, FL 32244	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	LARRY COFFEY - D 7146 RAMPART RIDGE CIR JAX, FL 32244	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Stephanie Payne 4/30/08 (904) 318-9421
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT 66012410

Brookshire Landing Owners Assoc #N05000011245

Board of Directors

035

May 22, 2008

MR. ROMELL BROWN 7278 RAMPART RIDGE CIRCLE JACKSONVILLE, FL 32244 **Term:** **to**	TREASURER	**Home:** **Work:** **Fax:** **Mobil:** (904) 534-1827 **Pager:** **E-mail** Browrj1@yahoo.com
MR. ROBERT BROWN 7177 RAMPART RIDGE CIRCLE JACKSONVILLE, FL 32244 **Term:** **to**	SECRETARY	**Home:** (904) 619-8544 **Work:** **Fax:** **Mobil:** (904) 536-8738 **Pager:** **E-mail** pasterbrown@buildersofthefaith.
MR. LARRY COFFEY 7146 RAMPART RIDGE CIRCLE JACKSONVILLE, FL 32244 **Term:** **to**	DIRECTOR	**Home:** (904) 779-7171 **Work:** **Fax:** **Mobil:** (904) 497-2934 **Pager:** **E-mail** larry.coffey@med.navy.mil
MRS. STEPHANIE PAYNE 7212 RAMPART RIDGE CIRCLE JACKSONVILLE, FL 32244 **Term:** **to**	PRESIDENT	**Home:** **Work:** (904) 619-6546 **Fax:** **Mobil:** (904) 318-9421 **Pager:** **E-mail** hspayne@gmail.com
MR ANTHONY SURLES 7254 RAMPART RIDGE CIRCLE JACKSONVILLE, FL 32244 **Term:** **to**	VICE PRESIDENT	**Home:** (904) 317-9016 **Work:** **Fax:** **Mobil:** (904) 677-1299 **Pager:** **E-mail** surles4@yahoo.com