

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002690

FILED
Apr 03, 2008
Secretary of State

Entity Name: BROOKER CREEK NORTH II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5550 W. EXECUTIVE DR. SUITE 550
TAMPA, FL 33609

New Principal Place of Business:

5550 W EXECUTIVE DRIVE
SUITE 550
TAMPA, FL 33609

Current Mailing Address:

5550 W. EXECUTIVE DR. SUITE 550
TAMPA, FL 33609

New Mailing Address:

5550 W EXECUTIVE DRIVE
SUITE 550
TAMPA, FL 33609

FEI Number: 20-5059478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARROD, GARY W
511 W BAY STREET
SUITE 400
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

HARROD, GARY W
5550 W EXECUTIVE DRIVE
SUITE 550
TAMPA, FL 33609 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:

04/03/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HARROD, CHAD W
Address: 511 W BAY STREET SUITE 400
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: WEBSTER, ROBERT C II
Address: 511 W BAY STREET SUITE 400
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HARROD, CHAD W
Address: 5550 W EXECUTIVE DRIVE SUITE 550
City-St-Zip: TAMPA, FL 33609

Title: D (X) Change () Addition
Name: WEBSTER, ROBERT C II
Address: 5550 W EXECUTIVE DRIVE SUITE 550
City-St-Zip: TAMPA, FL 33609

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: CHAD W HARROD

D

04/03/2008

Electronic Signature of Signing Officer or Director

Date