# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 22, 2009**
**Secretary of State**

DOCUMENT# N06000005767

**Entity Name:** BRENTWOOD PARK NEIGHBORHOOD ASSOCIATION AND WATCH. INC.

**Current Principal Place of Business:**

112 BAYLISS COURT
PENSACOLA, FL 32505

**New Principal Place of Business:**

**Current Mailing Address:**

112 BAYLISS COURT
PENSACOLA, FL 32505

**New Mailing Address:**

**FEI Number: 33-1139379** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

LICCIARDO, PAT
112 BAYLISS COURT
PENSACOLA, FL 32505 US

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

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: _____

Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: LICCIARDO, PAT
Address: 112 BAYLISS COURT
City-St-Zip: PENSACOLA, FL 32505

Title: VP ( ) Delete
Name: GREEN, RUSSELL
Address: 116 QUINA WAY
City-St-Zip: PENSACOLA, FL 32505

Title: S ( ) Delete
Name: CARNLEY, ELISA J
Address: 114 CARY MEMORIAL DR..
City-St-Zip: PENSACOLA, FL 32505

Title: T ( ) Delete
Name: CARNLEY, ELISA J
Address: 114 CARY MEMORIAL DR.
City-St-Zip: PENSACOLA, FL 32505

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: SUAREZ, ROBERT
Address: 223 BAYLISS CT
City-St-Zip: PENSACOLA, FL 32505

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: PAT LICCIARDO PRES 03/22/2009

Electronic Signature of Signing Officer or Director — Date