

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008866

FILED  
Apr 15, 2009  
Secretary of State

**Entity Name:** BROOKSVILLE BUSINESS ALLIANCE, INC.

**Current Principal Place of Business:**

31 S MAIN ST  
BROOKSVILLE, FL 34601

**New Principal Place of Business:**

**Current Mailing Address:**

31 S MAIN ST  
BROOKSVILLE, FL 34601

**New Mailing Address:**

**FEI Number:** 20-5033296

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DUNCAN, EVELYN  
31 S MAIN ST  
BROOKSVILLE, FL 34601 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: PETRIE, SALLY  
Address: 23251 GOLDEN PHEASANT TR  
City-St-Zip: BROOKSVILLE, FL 34601

Title: V (X) Delete  
Name: SWANN, MONIQUE  
Address: 151 S MAIN ST  
City-St-Zip: BROOKSVILLE, FL 34601

Title: S (X) Delete  
Name: CRENSHAW, ELIZABETH  
Address: 5 N MAIN ST  
City-St-Zip: BROOKSVILLE, FL 34601

Title: T (X) Delete  
Name: BARNES, KATHLEEN  
Address: 13009 OLD CRYSTAL RIVER RD  
City-St-Zip: BROOKSVILLE, FL 34601

**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:

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: EVELYN DUNCAN

T

04/15/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date