

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10095

FILED  
Jan 12, 2009  
Secretary of State

**Entity Name:** BRANDYWINE ESTATES HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

2263 W NEW HAVEN AVE  
PMB 387  
W MELBOURNE, FL 32904

**New Principal Place of Business:**

**Current Mailing Address:**

2263 W NEW HAVEN AVE  
PMB 387  
W MELBOURNE, FL 32904

**New Mailing Address:**

**FEI Number:** 59-2575730

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MOURITSEN, PAUL  
2480 BRANDYWINE LANE  
WEST MELBOURNE, FL 32904 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: MOURITSEN, PAUL  
Address: 2480 BRANDYWINE LANE  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: D ( ) Delete  
Name: BERTRAND, FOREST J  
Address: 4795 SUGAR CREEK DR.  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: T ( ) Delete  
Name: UNGER, GEORGE D  
Address: 4804 SWEET GUM PL  
City-St-Zip: W MELBOURNE, FL 32904

Title: VP ( ) Delete  
Name: KNIGHT, BOB  
Address: 2263 W NEW HAVE.  
City-St-Zip: MELBOURNE, FL 32904

Title: S ( ) Delete  
Name: KNIGHT, DRU  
Address: 2263 W NEW HAVEN  
City-St-Zip: W MELBOURNE, FL 32904

Title: D ( ) Delete  
Name: HEILMAN, RANDY  
Address: 4765 SUGAR CREEK DR  
City-St-Zip: WEST MELBOURNE, FL 32904

**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: GEORGE D UNGER

T

01/12/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date