

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90300 005 ****61.25

DOCUMENT # N10469

1. Entity Name

EASTBROOK HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

% STERLING MANAGEMENT, INC.
2880 SCHERER DR., SUITE 840
ST. PETERSBURG FL 33716

Mailing Address

% STERLING MANAGEMENT, INC.
2880 SCHERER DR., SUITE 840
ST. PETERSBURG FL 33716



2. Principal Place of Business

2870 Scherer Dr. N.

3. Mailing Address

2870 Scherer Dr. N.

Suite, Apt. #, etc.

100

Suite, Apt. #, etc.

100

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

Zip

33716

Country

USA

Zip

33716

Country

USA

4. FEI Number

59-2653337

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

COTTERILL, RON
1505 NORTH FLORIDA AVENUE E
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name Ron Cotterill

Street Address (P.O. Box Number is Not Acceptable)
1010 N. Florida Ave

City Tampa

FL

Zip Code

33602

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

Signature, typed or printed name of registered agent acceptable if applicable

(NOTE: Registered Agent signature required when reconstituting)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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

TITLE PD
NAME SCHIRMER, CRAIG
STREET ADDRESS 14929 REDCLIFF DR
CITY - ST - ZIP TAMPA FL 33625-1957 ☐ Delete

TITLE D
NAME EDELSON, ELLEN
STREET ADDRESS 15016 GREELY DR
CITY - ST - ZIP TAMPA FL 33625 ☐ Delete

TITLE D
NAME BABICEK, RANDY
STREET ADDRESS 15018 GREELEY DRIVE
CITY - ST - ZIP TAMPA FL 33625 ☐ Delete

TITLE VP
NAME BARUCH, RON
STREET ADDRESS 15008 REDCLIFF DR.
CITY - ST - ZIP TAMPA FL 33625-1957 ☐ Delete

TITLE T
NAME TRIM, CONNIE
STREET ADDRESS 14932 RED CLIFF DRIVE
CITY - ST - ZIP TAMPA FL 33625 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

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CITY - ST - ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Document Filing #