

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000002808

FILED  
Sep 12, 2012  
Secretary of State

**Entity Name:** BROOKHAVEN PROJECT MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

145 CITY PLACE  
PALM COAST, FL 32164

**New Principal Place of Business:**

2605 MAITLAND CENTER PARKWAY  
SUITE A  
MAITLAND, FL 32751

**Current Mailing Address:**

145 CITY PLACE  
PALM COAST, FL 32164

**New Mailing Address:**

PO BOX 941688  
MAITLAND, FL 32794

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

CHIUMENTO, MICHAEL D III  
143 CITY PLACE  
PALM COAST, FL 32164 US

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

CS SUNBIZ, LLC  
1551 SANDSPUR ROAD  
MAITLAND, FL 32751 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: SARAH SCHWEMIN

09/12/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CULP, SCOTT  
Address: 2605 MAITLAND CENTER PARKWAY, STE A  
City-St-Zip: MAITLAND, FL 32751

Title: STD  
Name: MISSIGMAN, PAUL  
Address: 2605 MAITLAND CENTER PARKWAY, STE A  
City-St-Zip: MAITLAND, FL 32751

Title: VPD  
Name: PRICE, DEAN C III  
Address: 2605 MAITLAND CENTER PARKWAY, STE A  
City-St-Zip: MAITLAND, FL 32751

I hereby 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 all other like empowered.

SIGNATURE: PAUL MISSIGMAN

S/T

09/12/2012

Electronic Signature of Signing Officer or Director

Date