2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2011
Secretary of State

DOCUMENT# N17643

Entity Name: PARK BROOK CROSSING - PHASE VII - HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2184 VICTORY GARDEN LANE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 16218
TALLAHASSEE, FL 32317 US

New Mailing Address:

FEI Number: 59-3118473 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, NANCY R
2184 VICTORY GARDEN LANE
TALLAHASSEE, FL 32301 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: PD
Name: CANOVA, MARY
Address: PO BOX 16218
City-St-Zip: TALLAHASSEE, FL 32317

Title: VPD
Name: PERDUE, KATE
Address: PO BOX 16218
City-St-Zip: TALLAHASSEE, FL 32317

Title: ST
Name: JONES, NANCY R
Address: P. O. BOX 16218
City-St-Zip: TALLAHASSEE, FL 32317

Title: D
Name: NIX, SABRINA
Address: P.O. BOX 16218
City-St-Zip: TALLAHASSEE, FL 32317

Title: D
Name: PARKER, DENNISE
Address: P.O. BOX 16218
City-St-Zip: TALLAHASSEE, FL 32317

Title: D
Name: THORNTON, NANCY
Address: P.O. BOX 16218
City-St-Zip: TALLAHASSEE, FL 32317

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: NANCY R. JONES S/T 02/05/2011

Electronic Signature of Signing Officer or Director Date