

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21590

FILED
Apr 02, 2012
Secretary of State

Entity Name: BROOK HOLLOW COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

BOX 500377
MALABAR, FL 32950 US

New Principal Place of Business:

Current Mailing Address:

BOX 500377
MALABAR, FL 32950 US

New Mailing Address:

FEI Number: 59-3092450

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAMBLISS, KAREN
1230 PEMBERTON TRAIL
MALABAR, FL 32950 US

Name and Address of New Registered Agent:

CHAMBLISS, KAREN
5667 CYPRESS CREEK DRIVE
GRANT, FL 32949 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:

04/02/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: HALLORAN, SUSAN
Address: 1160 BRIAR RUN CIRCLE
City-St-Zip: MALABAR, FL 32950

Title: S
Name: SOMMER, ANDREW
Address: 1110 HOLLOW BROOK LANE
City-St-Zip: MALABAR, FL 32950

Title: T
Name: CHAMBLISS, KAREN
Address: 5667 CYPRESS CREEK DRIVE
City-St-Zip: GRANT, FL 32949

Title: D
Name: FOUCHE, JOSEPH
Address: 1200 HOLLOW BROOK LANE
City-St-Zip: MALABAR, FL 32950

Title: D
Name: EGAN, ED
Address: 1055 HOLLOW BROOK LANE
City-St-Zip: MALABAR, FL 32950

Title: D
Name: DUBOSE, BEN
Address: 950 FALLS TRAIL
City-St-Zip: MALABAR, FL 32950

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: KAREN CHAMBLISS

TREA

04/02/2012

Electronic Signature of Signing Officer or Director

Date