

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23902

FILED
Jan 17, 2009
Secretary of State

Entity Name: BROADMOOR PINES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

7715 BROADMOOR PINES BLVD.
SARASOTA, FL 34243

New Principal Place of Business:

Current Mailing Address:

7715 BROADMOOR PINES BLVD.
SARASOTA, FL 34243

New Mailing Address:

FEI Number: 65-0046473

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUMMER, HUGO J
5971 CATTLERIDGE BLVD
STE 101
SARASOTA, FL 34232 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 () Delete
Name: LARUE, JAMES
Address: 7715 BROADMOOR PINES BLVD
City-St-Zip: SARASOTA, FL 34243

Title: SD () Delete
Name: LOCKIE, CLYDE
Address: 7904 BROADMOOR PINES BLVD
City-St-Zip: SARASOTA, FL 34243

Title: TD () Delete
Name: HAMPTON, DONNA
Address: 7936 BROADMOOR PINES
City-St-Zip: SARASOTA, FL 34243

Title: VPD () Delete
Name: KUMMER, HUGO J
Address: 7708 BROADMOOR PINES BOULEVARD
City-St-Zip: SARASOTA, FL 34243

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:

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: JIM LARUE

PRES

01/17/2009

Electronic Signature of Signing Officer or Director

Date