

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26654

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** BRIARWOOD MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

ADVANCED MGMT OF SW FLORIDA  
9031 TOWN CENTERM PKWY.  
BRADENTON, FL 34202 US

**New Principal Place of Business:**

**Current Mailing Address:**

ADVANCED MGMT OF SW FLORIDA  
9031 TOWN CENTERM PKWY.  
BRADENTON, FL 34202 US

**New Mailing Address:**

**FEI Number:** 65-0279178 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

ADVANCED MANAGEMENT OF SW FL, INC  
9031 TOWN CENTER PARKWAY  
BRADENTON, FL 34202 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SAKERKA, JANET  
Address: 2824 57TH DRIVE EAST  
City-St-Zip: BRADENTON, FL 34203

Title: P ( ) Delete  
Name: FLECK, JOHN P JR.  
Address: 1103 NINTH AVE. N.  
City-St-Zip: BRADENTON, FL 34205

Title: ATS ( ) Delete  
Name: GLANZ, JANE  
Address: 3133 57TH AVE CIR E.  
City-St-Zip: BRADENTON, FL 34203

Title: S ( ) Delete  
Name: COOKSEY, CALVIN  
Address: 2854 56TH AVE CIR E  
City-St-Zip: BRADENTON, FL 34203

Title: T ( ) Delete  
Name: FASSER, DAVID  
Address: 5729 29TH CT E  
City-St-Zip: BRADENTON, FL 34203

Title: D ( ) Delete  
Name: WHEELER, WILLIAM  
Address: 3153 57TH AVE CIR E  
City-St-Zip: BRADENTON, FL 34203

**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:

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: DAVID FASSER

T

05/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date