

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 17, 2008 8:00 am**  
**Secretary of State**

03-17-2008 90017 012 \*\*\*\*61.25

**DOCUMENT # N42111**

1. Entity Name

BRIGHTON WOODS HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

1711 COTSWOLD DRIVE  
ORLANDO FL 32825  
US

Mailing Address

c/o LIGHTHOUSE MANAGEMENT  
PO BOX 0774  
WINDERMERE FL 34786-0774  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3050920

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/07)

6. Name and Address of Current Registered Agent

WEAN, PAUL  
646 EAST COLONIAL DR  
ORLANDO FL 32803

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME FOLLMER, WILLIAM  
STREET ADDRESS 1711 COTSWOLD DRIVE  
CITY-ST-ZIP ORLANDO FL 32825 ☐ Delete

TITLE DST  
NAME OWEN, HEATHER  
STREET ADDRESS 1601 BILLINGSHURST COURT  
CITY-ST-ZIP ORLANDO FL 32825 ☒ Delete

TITLE VPD  
NAME ARMSTRONG, BRIAN  
STREET ADDRESS 1600 BILLINGSHURST COURT  
CITY-ST-ZIP ORLANDO FL 32825 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DST  
NAME BENHADI, RAOUF  
STREET ADDRESS 8679 GLYBORNE COURT  
CITY-ST-ZIP ORLANDO, FL 32825 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*William G. Follmer* William G. Follmer, President 3-6-2008 407-973-8340