

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001601

FILED
Apr 12, 2009
Secretary of State

Entity Name: BRANTLEY ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2755 BORDER LAKE ROAD STE 101
APOPKA, FL 327034857 US

New Principal Place of Business:

Current Mailing Address:

2755 BORDER LAKE ROAD STE 101
APOPKA, FL 327034857 US

New Mailing Address:

FEI Number: 59-3252221

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KANAGA, MERIDYTHE
2755 BORDER LAKE ROAD STE 101
APOPKA, FL 327034857 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: DS () Delete
Name: DAVIDSON, JUDY
Address: 1140 BRANTLEY ESTATES DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D () Delete
Name: BEHAM, SILVIA
Address: 1128 BRANTLEY ESTATES DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DP () Delete
Name: WILTON, MURRAY
Address: 1168 BRANTLEY ESTATES DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DT () Delete
Name: KAPLAN, WARREN
Address: 1186 BRANTLEY ESTATES DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DVP () Delete
Name: WOOD, MICHAEL
Address: 1149 BRANTLEY ESTATES DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D () Delete
Name: GINGOLD, HERB
Address: 1146 BRANTLEY ESTATES DR.
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: OSSINSKY, MARK
Address: 1158 BRANTLEY ESTATES DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: JUDY DAVIDSON

DS

04/12/2009

Electronic Signature of Signing Officer or Director

Date