

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004891

FILED
Apr 25, 2009
Secretary of State

Entity Name: BROADMOOR HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5208 SW 91ST DRIVE
SUITE D
GAINESVILLE, FL 32608 US

New Principal Place of Business:

Current Mailing Address:

5208 SW 91ST DRIVE
SUITE D
GAINESVILLE, FL 32608 US

New Mailing Address:

FEI Number: 59-3318602 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIPPE, PATRICIA K
5208 SW 91ST DRIVE
SUITE D
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

CONNER, SARAH AGENT
5208 SW 91ST DRIVE
SUITE D
GAINESVILLE, FL 32608 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: SARAH CONNER, AGENT

04/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEE, JEFF
Address: 10634 NW 9TH RD
City-St-Zip: GAINESVILLE, FL 32606

Title: VP () Delete
Name: SMYTHE, PAT
Address: 1033 NW 106TH ST
City-St-Zip: GAINESVILLE, FL 32606

Title: D () Delete
Name: WILSON, HAL
Address: 10405 NW 13TH AVE.
City-St-Zip: GAINESVILLE, FL 32606

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CRUZ, PEDRO
Address: 10221 NW 10TH LANE
City-St-Zip: GAINESVILLE, FL 32606

Title: VP (X) Change () Addition
Name: CARMICHAEL, ELISE
Address: 10416 NW 10TH LANE
City-St-Zip: GAINESVILLE, FL 32606

Title: S (X) Change () Addition
Name: WILSON, HAL
Address: 10405 NW 13TH AVE.
City-St-Zip: GAINESVILLE, FL 32606

Title: D () Change (X) Addition
Name: AGUILAR, SANDRA
Address: 1419 NW 98TH TERRACE
City-St-Zip: GAINESVILLE, FL 32606

Title: D () Change (X) Addition
Name: KIMBROUGH, KATHY
Address: 1817 NW 68TH TERR
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Change (X) Addition
Name: HAYES, TIMOTHY
Address: 9929 NW 13TH AVENUE
City-St-Zip: GAINESVILLE, FL 32606

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: PEDRO CRUZ

P

04/25/2009

Electronic Signature of Signing Officer or Director

Date