

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002449

FILED
Aug 01, 2007
Secretary of State

Entity Name: BRAYWICK OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

79 MASTERS DRIVE
SAINT AUGUSTINE, FL 32084 US

New Principal Place of Business:

Current Mailing Address:

79 MASTERS DRIVE
SAINT AUGUSTINE, FL 32084 US

New Mailing Address:

FEI Number: 59-3314620 **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:

HERREN, JANICE L
79 MASTERS DRIVE
SAINT AUGUSTINE, FL 32084 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: P () Delete
Name: PERRY, MARTHA
Address: 9514 SOUTHBROOK DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP () Delete
Name: PARKER, CAROLYN
Address: 9508 SOUTHBROOK DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

Title: T () Delete
Name: MILLER, LOUIS
Address: 9532 SOUTHBROOK DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

Title: S () Delete
Name: HEARNshaw, VANESSA
Address: 9526 SOUTHBROOK DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WRIGHT, STEVEN
Address: 9543 THORNABY LANE
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP (X) Change () Addition
Name: RICHARDS, MARK
Address: 7432 CARRIAGESIDE DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

Title: S (X) Change () Addition
Name: SANDERS, SHAWN
Address: 7469 CARRIAGESIDE DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

Title: T (X) Change () Addition
Name: PERLE, DAN
Address: 9509 SOUTHBROOK DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

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: STEVEN WRIGHT

P

08/01/2007

Electronic Signature of Signing Officer or Director

Date