

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000860

FILED
Apr 08, 2009
Secretary of State

Entity Name: BROOKSIDE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

29619 CHAPEL PARK DR
WESLEY CHAPEL, FL 33543 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 7227
WESLEY CHAPEL, FL 33544

New Mailing Address:

PO BOX 7227
WESLEY CHAPEL, FL 33545

FEI Number: 59-3560547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUDNY, MICHAEL
BRUDNY & RABIN, P.A.
200 PINE AVE., STE A
OLDSMAR, FL 34677 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: FISHMAN, STEVEN
Address: 29737 CHAPEL PRK DR
City-St-Zip: ZEPHYRHILLS, FL 33543

Title: S () Delete
Name: ESPOSITO, ANTHONY V
Address: 29516 CHAPEL PRK DR
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: VP () Delete
Name: MCCULLOUGH, ELENA
Address: 29743 CHAPEL PRK DR
City-St-Zip: ZEPHYRHILLS, FL 33543

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MAY, ANGELA M
Address: 29619 CHAPEL PRK DR
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: S (X) Change () Addition
Name: SIMMS, STEELY
Address: 29705 CHAPEL PRK DR
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: VP (X) Change () Addition
Name: TAGLIONE, ROBERTO
Address: 29705 CHAPEL PRK DR
City-St-Zip: WESLEY CHAPEL, FL 33543

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: ANGELA M MAY

P

04/08/2009

Electronic Signature of Signing Officer or Director

Date