2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 20, 2008
Secretary of State

DOCUMENT# N98000001064

Entity Name: BROOKWOOD FOREST WEST OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1044 JONES CREEK DR
JACKSONVILLE, FL 322256311

New Principal Place of Business:

Current Mailing Address:

1044 JONES CREEK DR
JACKSONVILLE, FL 322256311

New Mailing Address:

FEI Number: 59-3492769 **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:

NOSALEK, FRANK MR.
1044 JONES CREEK DR
JACKSONVILLE, FL 322256311 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: ADDY, KARL K
Address: 1019 JONES CREEK DR
City-St-Zip: JACKSONVILLE, FL 322256308

Title: S ( ) Delete
Name: BOOTH, TINA
Address: 1035 JONES CREEK DR.
City-St-Zip: JACKSONVILLE, FL 32225

Title: TSD (X) Delete
Name: NOSALEK, FRANK
Address: 1044 JONES CREEK DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

Title: MAL (X) Delete
Name: HARRISON, JAY
Address: 1027 JONES CREEK DR
City-St-Zip: JACKSONVILLE, FL 322256308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TSD (X) Change ( ) Addition
Name: NOSALEK, FRANK TREAS
Address: 1044 JONES CREEK DRIVE
City-St-Zip: JACKSONVILLE, FL 322256311 US

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: FRANK NOSALEK TREA 05/20/2008

Electronic Signature of Signing Officer or Director — Date