2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N9800001064

1. Entity Name



BROOKWOOD FOREST WEST		
Principal Place of Business	Mailing Address	
1036 JONES CREEK DRIVE JACKSONVILLE FL 32225	1036 Jones Creek Drive Jacksonville FL 32225	
2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90295 019 ****61.25

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Principal Plac 1036 JONES C JACKSONVILLE			1036	ng Address Jones Creek Drive Conville FL 32225									
Principal Place of Business 3. Mailing Address				-									
Suite, Apt. #, etc. Suite, Apt. #, etc.			uite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES						
City & State City & State			ity & State				4. FEI Number 59	-3492769			oplied For ot Applicable		
Zip		Country	Zi	Zip Country				5. Certificate of Status Desired					
	6. Name	and Address of Curre	ent Register	ed Agent				7. Name and Addr	ess of New Re	gisterec	Agent		
						Name							
ANDERSON, BARBARA S 1036 JONES CREEK DRIVE					Street Addre	ess (F	P.O. Box Number is N	ot Acceptable)					
JACKSON	NVILLE FL 3	2225	The second	مصياء الساء كالمتاسية				many many	م مستوهد الودخوري	-			
						City				F	Zip Code	e	
			t for the purp	oose of changing its	registere	ed office or reg	istere	ed agent, or both, in the	ne State of Flori	da. Lan	n familiar with,	and accept	
the obligations of registered agent. SIGNATURE Backers 5. Anderson 4/23/2003													
	Signature, typed o	r printed name of registered as	gent and title if app	olicable. (NOTE	: Registere	d Agent signature red	quired	when reinstating)		DATE			
FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution.								\$5.00 May Be Added to Fees			ck Payable ertment of S		
10.	-+	OFFICERS AND	DIRECTORS		11.			L ADDITIONS/CHANGE	S TO OFFICER	SANDE	IRECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1036 JONE	I, BARBARA S S CREEK DRIVE	<u> </u>	☐ Delete	TITLE NAM STRE		<u> </u>	1.00 m m m m m	<u> </u>	71110	Change	Addition	
TITLE	VD	ILLE FL 32225		Delete	TITLE						Change	Addition	
NAME Street Address (City-St-Zip	BOOTH, TI 1035 JONE	na s creek dr. Ille fl 32225		Detete	NAM STRE					•	□ clia⊞e	Addition	
TITLE -NAME STREET ADDRESS CITY-ST-ZIP		FRANK S CREEK DRIVE ILLE FL 32225		Delete	STRE	ET ADDRESS -ST-ZIP		and the supplementary of the second		رجعي الم	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JACKSON	ILLE FE OZZZZ		☐ Delete	TITLE NAMI STRE						Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAMI STRE	- -					Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		information and lind a	Sale Mary 70	☐ Delete			- 0	110 07(2Vi) Flore	,		Change	Addition	

rnereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

904-854 5569