

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001324

FILED  
Apr 16, 2007  
Secretary of State

Entity Name: BROOKSHIRE ESTATES HOMEOWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

3527 PALM HARBOR BLVD  
PALM HARBOR, FL 34683

## New Principal Place of Business:

## Current Mailing Address:

3527 PALM HARBOR BLVD  
PALM HARBOR, FL 34683

## New Mailing Address:

FEI Number: 59-3503668

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HANSON, JACK B  
MELROSE MANAGEMENT GROUP  
3527 PALM HARBOR BLVD  
PALM HARBOR, FL 34683 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: PD ( ) Delete  
Name: WEHR, TOM  
Address: 14701 REDCLIFF DRIVE  
City-St-Zip: TAMPA, FL 33625

Title: VPD ( ) Delete  
Name: WILSON, CRAIG  
Address: 14834 REDCLIFF DR.  
City-St-Zip: TAMPA, FL 33625

Title: SD ( ) Delete  
Name: ALICEA, JUDY  
Address: 5808 BLACK WALNUT DRIVE  
City-St-Zip: TAMPA, FL 33625

Title: TD ( ) Delete  
Name: DOWNING, ARTHUR  
Address: 14706 REDCLIFF DRIVE  
City-St-Zip: TAMPA, FL 33625

Title: D ( ) Delete  
Name: ELFERING, PAULA  
Address: 14832 REDCLIFF DRIVE  
City-St-Zip: TAMPA, FL 33625

Title: D (X) Delete  
Name: ADCOCK, STEPHEN  
Address: 14808 REDCLIFF DRIVE  
City-St-Zip: TAMPA, FL 33625

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: ADCOCK, STEPHEN  
Address: 14808 REDCLIFF DR.  
City-St-Zip: TAMPA, FL 33625

Title: SD (X) Change ( ) Addition  
Name: ELFERING, PAULA  
Address: 14832 REDCLIFF DR  
City-St-Zip: TAMPA, FL 33625

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: KALEZIC, ILEANA  
Address: 5613 BROOKDALE WAY  
City-St-Zip: TAMPA, FL 33625

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JACK B HANSON

RA

04/16/2007

Electronic Signature of Signing Officer or Director

Date