

FILED
Jun 05, 2003 8:00 am
Secretary of State

05-05-2003 91871 027 ****61.25

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

DOCUMENT # N99000003330

1. Entity Name

BROOKER CREEK PLAZA MAINTENANCE ASSOCIATION, INC



Principal Place of Business

3014 US HWY 19
HOLIDAY FL 34691

Mailing Address

3014 US HWY 19
HOLIDAY FL 34691

55046683

2. Principal Place of Business

34 W. Orange St.

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box # 1879

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

Tarpon Springs, FL

City & State

Tarpon Springs, FL

4. FEI Number NOT APPLICABLE

Applied For

Not Applicable

Zip

34689

Country

USA

Zip

34688

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NIKJEH, FARHOD
31111 US HWY 19 NORTH
PALM HARBOR FL 34684

7. Name and Address of New Registered Agent

Name Mary Himonetos

Street Address (P.O. Box Number is Not Acceptable)

34 W. Orange St.

City Tarpon Springs

FL

Zip Code 34689

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Mary Himonetos

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/30/23

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
NAME NIKJEH, FARHOD
STREET ADDRESS 31111 US HWY 19 NORTH
CITY-ST-ZIP PALM HARBOR FL 34684

TITLE D ☒ Delete
NAME BEKESH, RICHARD
STREET ADDRESS 3014 US HWY NO.
CITY-ST-ZIP HOLIDAY FL 34691

TITLE D ☒ Delete
NAME HENWOOD, CHERYL
STREET ADDRESS 3014 US HWY 19 NO.
CITY-ST-ZIP HOLIDAY FL 34691

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DVP ☐ Change ☒ Addition
NAME Mary Himonetos
STREET ADDRESS 34 W. Orange St.
CITY-ST-ZIP Tarpon Springs, FL 34689

TITLE DVP ☐ Change ☒ Addition
NAME Carol E. Martin
STREET ADDRESS 34 W. Orange St.
CITY-ST-ZIP Tarpon Springs, FL 34689

TITLE DVP ☐ Change ☒ Addition
NAME John B. Thompson
STREET ADDRESS 34 W. Orange St. - Tarpon Springs
CITY-ST-ZIP FL 34689

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby 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.

SIGNATURE:

Mary Himonetos

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/03

Date

727-938-0160

Daytime Phone #

CR2E037 (10/02)