

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004377

FILED
Feb 25, 2009
Secretary of State

Entity Name: BROOKSIDE PROFESSIONAL CENTER, INC.

Current Principal Place of Business:

1831 N BELCHER ROAD STE G-3
CLEARWATER, FL 33765

New Principal Place of Business:

Current Mailing Address:

1831 N BELCHER ROAD STE G-3
CLEARWATER, FL 33765

New Mailing Address:

FEI Number: 59-3744186

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMMOND, JAMES M
1831 N BELCHER ROAD STE A-1
CLEARWATER, FL 33765 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: D () Delete
Name: HOWELL, HOWARD
Address: 701 SPOTTIS WOOD LA.
City-St-Zip: CLEARWATER, FL 33756

Title: PD () Delete
Name: KRIVACS, JAMES K
Address: 1831 N BELCHER RD., STE G-3
City-St-Zip: CLEARWATER, FL 33765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOWELL, HOWARD
Address: 701 SPOTTIS WOOD LA.
City-St-Zip: CLEARWATER, FL 33756

Title: VPD (X) Change () Addition
Name: KRIVACS, JAMES K
Address: 1831 N BELCHER RD., STE G-3
City-St-Zip: CLEARWATER, FL 33765

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: JAMES KRIVACS

D

02/25/2009

Electronic Signature of Signing Officer or Director

Date