

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000105380

Entity Name: BROWNSTONE COMMONS, INC.

FILED
Feb 06, 2009
Secretary of State

Current Principal Place of Business:

11191 S.E. 55TH AVE
UNIT 101
BELLEVIEW, FL 34420

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2091
BELLEVIEW, FL 34421

New Mailing Address:

P.O. BOX 2091
BELLEVIEW, FL 344212091 US

FEI Number: 59-3682421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICANDIA, PAUL A II
10254 S.E. 41ST TERRACE
BELLEVIEW, FL 34420 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DICANDIA, PAUL A II
Address: 10254 S.E. 41ST TERRACE
City-St-Zip: BELLEVIEW, FL 34420

Title: VD () Delete
Name: DICANDIA, LUCY J
Address: 4340 S.E. 106TH STREET
City-St-Zip: BELLEVIEW, FL 34420

Title: TD () Delete
Name: DICANDIA, CONSTANCE M
Address: 1531 NW 79 TERRACE
City-St-Zip: PEMBROKE PINE, FL 33024

Title: SD () Delete
Name: LEVESQUE, LISA
Address: 3008 SE 11TH STREET
City-St-Zip: OCALA, FL 34471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL DICANDIA

PD

02/06/2009

Electronic Signature of Signing Officer or Director

Date