

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000002690

**FILED**  
**Mar 20, 2024**  
**Secretary of State**  
**6270421412CC**

**Entity Name:** BROOKER CREEK NORTH II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5550 W EXECUTIVE DRIVE  
SUITE 550  
TAMPA, FL 33609

**Current Mailing Address:**

5550 W EXECUTIVE DRIVE  
SUITE 550  
TAMPA, FL 33609

**FEI Number: 20-5059478**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MAVAR, GRAHAM  
5550 W EXECUTIVE DRIVE  
SUITE 550  
TAMPA, FL 33609 US

*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

**Officer/Director Detail :**

Title            D  
Name            MAVAR, GRAHAM  
Address        5550 W EXECUTIVE DRIVE  
                  SUITE 550  
City-State-Zip: TAMPA FL 33609

*I hereby 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 all other like empowered.*

**SIGNATURE: GRAHAM MAVAR** \_\_\_\_\_

**DIRECTOR**

**03/20/2024**

Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date