

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717271

FILED
Apr 27, 2005
Secretary of State

Entity Name: LAS BRISAS, ASSOCIATION, INC.

Current Principal Place of Business:

1939 JEFFERSON STREET
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

1939 JEFFERSON STREET
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 59-2383827

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLF, ED
1939 JEFFERSON
SUITE 404
HOLLYWOOD, FL 33020 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: VD () Delete
Name: PAGAN, ALEJA
Address: 1939 JEFFERSON 401
City-St-Zip: HOLLYWOOD, FL 33020

Title: PD () Delete
Name: WOLF, ED
Address: 1939 JEFFERSON STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: TD () Delete
Name: CHERRY, NOREEN
Address: 1939 JEFFERSON ST #101
City-St-Zip: HOLLYWOOD, FL 33020

Title: SD () Delete
Name: LAUGHEAD, MICHAEL
Address: 320 POLK ST.
City-St-Zip: HOLLYWOOD, FL 33019

Title: D () Delete
Name: DANVER, MARY
Address: 1939 JEFFERSON ST #204
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WOLF, ED
Address: 1939 JEFFERSON 404
City-St-Zip: HOLLYWOOD, FL 33020

Title: VP (X) Change () Addition
Name: ABBOTONI, GUY
Address: 2116 TYLER STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: TD (X) Change () Addition
Name: BERG, WOLFGANG
Address: 1505 TYLER STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: SD (X) Change () Addition
Name: LAUGHEAD, MARY
Address: 320 POLK ST.
City-St-Zip: HOLLYWOOD, FL 33019

Title: D (X) Change () Addition
Name: PAGAN, ALEJA
Address: 1939 JEFFERSON ST #401
City-St-Zip: HOLLYWOOD, FL 33020

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARY MATHIS LAUGHEAD

SD

04/27/2005

Electronic Signature of Signing Officer or Director

Date