

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 717271

**Entity Name:** LAS BRISAS, ASSOCIATION, INC.

**Current Principal Place of Business:**

1939 JEFFERSON STREET  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

1939 JEFFERSON STREET  
HOLLYWOOD, FL 33020

**FEI Number: 59-2383827**

**Certificate of Status Desired: No**

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

PERLMAN, MARK ESQ  
1820 E HALLANDALE BEACH BOULEVARD  
HALLANDALE BEACH, FL 33009 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 PD  
Name BERG, WOLFGANG PETER  
Address 1505 TYLER STREET  
City-State-Zip: HOLLYWOOD FL 33020

Title VPD  
Name FERREIRA, DANIEL  
Address 501 THREE ISLANDS BLVD #505  
City-State-Zip: HALLANDALE BEACH FL 33009

Title D  
Name BERG, MIRIAM  
Address 1505 TYLER STREET  
City-State-Zip: HOLLYWOOD FL 33020

Title TD  
Name GREENE, ANDREW  
Address 450 N PARK ROAD, #711  
City-State-Zip: HOLLYWOOD FL 33021

Title SD  
Name EYCLESCHHEIMER, SUSAN  
Address 1939 JEFFERSON STREET APT 304  
City-State-Zip: HOLLYWOOD FL 33020

*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: WOLFGANG PETER BERG**

**P**

**04/29/2014**

Electronic Signature of Signing Officer/Director Detail

Date