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: GIOVANNA J ARELLANO

Electronic Signature of Signing Officer/Director Detail

Name	JOHNSON, MARCIA	Name	GOMEZ, RAFAEL
Address	1939 JEFFERSON STREET	Address	1939 JEFFERSON STREET
City-State-Zip:	HOLLYWOOD FL 33020	City-State-Zip:	HOLLYWOOD FL 33020
Title	SECRETARY	Title	PRESIDENT
Name	PHILLIPS, FRED	Name	ARELLANO, GIOVANNA J.
Name Address		Name Address	ARELLANO, GIOVANNA J. 1939 JEFFERSON STREET
Address	PHILLIPS, FRED		-,

Title

VP

Title

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		
Officer/Director Detail :		

## FEI Number: 59-2383827

**Current Mailing Address: 1939 JEFFERSON STREET** HOLLYWOOD, FL 33020

**1939 JEFFERSON STREET** HOLLYWOOD, FL 33020

## Name and Address of Current Registered Agent:

Entity Name: LAS BRISAS, ASSOCIATION, INC.

**Current Principal Place of Business:** 

PERLMAN, MARK ESQ 1820 E HALLANDALE BEACH BOULEVARD HALLANDALE BEACH, FL 33009 US

TREASURER

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# 717271

## FILED Feb 13, 2019 Secretary of State 8885811682CC

Certificate of Status Desired: No

Date

02/13/2019 Date

PRESIDENT