2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 719105

Entity Name: MONTECRISTI COUNTRY CLUB APARTMENTS, INC.

FILED May 05, 2017 **Secretary of State** CC9560482848

Date

Current Principal Place of Business:

BROCK PROPERTY MANAGEMENT, INC 12444 W ATLANTIC BLVD CORAL SPRINGS, FL 33071

Current Mailing Address:

BROCK PROPERTY MANAGEMENT, INC 12444 W ATLANTIC BLVD CORAL SPRINGS, FL 33071 US

FEI Number: 59-1358730 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JENNINGS & VALANCY, PA 311 SE 13 TH STREET FT. LAUDERDALE, FL 33316 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:

Officer/Director Detail:

INC

Title Title

Electronic Signature of Registered Agent

LAURETANO, ANGELA LITZ. GEORGE Name Name

Address BROCK PROPERTY MANAGEMENT, BROCK PROPERTY MANAGEMENT, Address

INC

12444 W ATLANTIC BLVD 12444 W ATLANTIC BLVD

City-State-Zip: CORAL SPRINGS FL 33071 City-State-Zip: CORAL SPRINGS FL 33071

Title **TREASURER** D Title

Name TAVARES, SILVIA Name VIANA, CLEVERSON

Address BROCK PROPERTY MANAGEMENT, Address BROCK PROPERTY MANAGEMENT, INC INC

12444 W ATLANTIC BLVD

12444 W ATLANTIC BLVD CORAL SPRINGS FL 33071 CORAL SPRINGS FL 33071 City-State-Zip: City-State-Zip:

Title **DIRECTOR** Title **SECRETARY**

Name BRAGINSKY, ALLEN Name SCHER, STEFANIE

Address BROCK PROPERTY MANAGEMENT. Address BROCK PROPERTY MANAGEMENT.

INC

12444 W ATLANTIC BLVD 12444 W ATLANTIC BLVD

CORAL SPRINGS FL 33071 CORAL SPRINGS FL 33071 City-State-Zip: City-State-Zip:

VΡ Title

JONES, HEATH Name

Address BROCK PROPERTY MANAGEMENT,

INC

INC

12444 W ATLANTIC BLVD

CORAL SPRINGS FL 33071 City-State-Zip:

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: ANGELA LAURETANO Ρ 05/05/2017