

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746709

**Entity Name:** 212 BRINY AVENUE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

212 BRINY AVE.  
A1  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

2637 E ATLANTIC BLVD.  
P.O. BOX 142  
POMPANO BEACH, FL 33062

**FEI Number:** 59-1926845

**Certificate of Status Desired:** No

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

METHOD MANAGEMENT LLC.  
3400 BEACON ST  
POMPANO BEACH, FL 33062 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 CONWAY, LAURIE  
Address 212 BRINY AVE.  
City-State-Zip: POMPANO BEACH FL 33062

Title TD  
Name HARRIS, DAVID  
Address 212 BRINY AVE.  
City-State-Zip: POMPANO BEACH FL 33062

Title VD  
Name CARRIER, JOHN  
Address 212 BRINY AVE  
City-State-Zip: POMPANO BEACH FL 33062

Title S  
Name SWAY, REBECCA  
Address 212 BRINY AVE.  
City-State-Zip: POMPANO BEACH FL 33062

*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:** LAURIE CONWAY

**PRESIDENT**

**03/24/2020**

Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date