

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747041

Entity Name: BRIAN COURT CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 05, 2021
Secretary of State
5135350067CC

Current Principal Place of Business:

C/O COASTAL ASSOCIATION SERVICES, LLC
1314 CAPE CORAL PKWY E UNIT 205
CAPE CORAL, FL 33904

Current Mailing Address:

C/O COASTAL ASSOCIATION SERVICES, LLC
1314 CAPE CORAL PKWY E UNIT 205
CAPE CORAL, FL 33904 US

FEI Number: 59-2097489

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COASTAL ASSOCIATION SERVICES, LLC
C/O COASTAL ASSOCIATION SERVICES, LLC
1314 CAPE CORAL PKWY E UNIT 205
CAPE CORAL, FL 33904 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: TROY FUTCH

04/05/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name GUTHRIE, CHARLES
Address C/O COASTAL ASSOCIATION SERVICES, LLC
1314 CAPE CORAL PKWY E UNIT 205
City-State-Zip: CAPE CORAL FL 33904

Title PRESIDENT
Name TWEED, ROGER
Address C/O COASTAL ASSOCIATION SERVICES, LLC
1314 CAPE CORAL PKWY E UNIT 205
City-State-Zip: CAPE CORAL FL 33904

Title SECRETARY, TREASURER
Name CAMPBELL, SUSAN
Address C/O COASTAL ASSOCIATION SERVICES, LLC
1314 CAPE CORAL PKWY E UNIT 205
City-State-Zip: CAPE CORAL FL 33904

Title DIRECTOR
Name OLIVEIRA, GEORGE
Address C/O COASTAL ASSOCIATION SERVICES, LLC
1314 CAPE CORAL PKWY E UNIT 205
City-State-Zip: CAPE CORAL FL 33904

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: ROGER TWEED

PRESIDENT

04/05/2021

Electronic Signature of Signing Officer/Director Detail

Date