

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 749269

**FILED  
Apr 13, 2018  
Secretary of State  
CC5825759080**

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

**Current Principal Place of Business:**

C/O FIRSTSERVICE RESIDENTIAL  
6620 SOUTHPOINT DRIVE SOUTH 610  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

C/O FIRSTSERVICE RESIDENTIAL  
6620 SOUTHPOINT DRIVE SOUTH 610  
JACKSONVILLE, FL 32216 US

**FEI Number:** 59-2182732

**Certificate of Status Desired:** No

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

FIRST SERVICE RESIDENTIAL  
C/O FIRSTSERVICE RESIDENTIAL  
6620 SOUTHPOINT DRIVE SOUTH 610  
JACKSONVILLE, FL 32216 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:** JOHN MOORE

04/13/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name MOORE, JOHN  
Address C/O FIRSTSERVICE RESIDENTIAL  
6620 SOUTHPOINT DRIVE SOUTH 610  
City-State-Zip: JACKSONVILLE FL 32216

Title DIRECTOR  
Name LEMMENES, MARK  
Address C/O FIRSTSERVICE RESIDENTIAL  
6620 SOUTHPOINT DRIVE SOUTH 610  
City-State-Zip: JACKSONVILLE FL 32216

Title PRESIDENT  
Name STERGAR, SUZANNE  
Address C/O FIRSTSERVICE RESIDENTIAL  
6620 SOUTHPOINT DRIVE SOUTH 610  
City-State-Zip: JACKSONVILLE FL 32216

Title PRESIDENT  
Name SHEA, TIFF  
Address C/O FIRSTSERVICE RESIDENTIAL  
6620 SOUTHPOINT DRIVE SOUTH 610  
City-State-Zip: JACKSONVILLE FL 32216

Title SECRETARY  
Name AMIN, SWATI  
Address C/O FIRSTSERVICE RESIDENTIAL  
6620 SOUTHPOINT DRIVE SOUTH 610  
City-State-Zip: JACKSONVILLE FL 32216

*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:** TIFF SHEA

PRESIDENT

04/13/2018

Electronic Signature of Signing Officer/Director Detail

Date