

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 749847

**FILED**  
**Apr 09, 2019**  
**Secretary of State**  
**3823628471CC**

**Entity Name:** THE BRABEN CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

THAD JONES  
4316 S OCEAN BLVD 2S  
HIGHLAND BEACH, FL 33487

**Current Mailing Address:**

THAD JONES  
4316 S OCEAN BLVD 2S  
HIGHLAND BEACH, FL 33487 US

**FEI Number:** 37-1096778

**Certificate of Status Desired:** Yes

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

THE BRABEN CONDOMINIUM ASSOC.  
4316 SOUTH OCEAN BLVD  
APT. 3  
HIGHLAND BEACH, FL 33487 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:** THAD JONES

04/09/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name BROWN, LYNNE  
Address LYNNE BROWN  
4316 S OCEAN BLVD #1  
City-State-Zip: HIGHLAND BEACH FL 33487

Title VP  
Name OUTTEN, KATHY  
Address 4316 S. OCEAN BLVD. #2  
City-State-Zip: HIGHLAND BEACH FL 33487

Title TREASURER  
Name JONES, THAD  
Address THAD JONES  
4316 S. OCEAN BLVD #2S  
City-State-Zip: HIGHLAND BEACH FL 33487

*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:** THAD JONES

**TREASURER**

04/09/2019

Electronic Signature of Signing Officer/Director Detail

Date