

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01638

Entity Name: LAS BRISAS HOMEOWNERS' ASSOCIATION OF NEW SMYRNA BEACH, INC.

FILED
Feb 27, 2015
Secretary of State
CC3837078092

Current Principal Place of Business:

3001 SO ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169

Current Mailing Address:

3001 SO ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169

FEI Number: 59-2435801

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PETERSON, SID CJR
418 CANAL STREET
NEW SMYRNA BEACH, FL 32168 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 LENTZ, CURT
Address 270 WAYMONT CT.
#120
City-State-Zip: LAKE MARY FL 32746

Title TD
Name HEWES, KATHLEEN
Address 3001 S ATLANTIC AVE #422
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title S
Name KRAMER, PETER
Address 3001 S ATLANTIC AVE #421
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title DIRECTOR
Name KNOTT, KYM
Address 330 EVANSDALE ROAD
City-State-Zip: LAKE MARY FL 32746

Title VP
Name BLACKWELDER, ELLIOTT
Address 277 LESLIE LANE
City-State-Zip: LAKE MARY FL 32746

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: PETER KRAMER

SECRETARY

02/27/2015

Electronic Signature of Signing Officer/Director Detail

Date