2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010231

Entity Name: BALI AT THE OASIS NEIGHBORHOOD ASSOCIATION, INC.

FILED Apr 25, 2016 **Secretary of State** CC3819638264

Current Principal Place of Business:

FIRST SERVICE RESIDENTIAL 5805 BLUE LAGOON DRIVE SUITE 310 310 MIAMI, FL 33126

Current Mailing Address:

FIRST SERVICE RESIDENTIAL 5805 BLUE LAGOON DRIVE SUITE 310 310 MIAMI, FL 33126 US

FEI Number: 20-3617680 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIATION LAW GROUP 1200 BRICKELL AVENUE PH 2000

MIAMI, FL 33131 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

Officer/Director Detail:

Title **PRESIDENT** Title **SECRETARY**

Name DORCELY, SAENS Name FLINGOS, THOMAS III

C/O FIRSTSERVICE RESIDENTIAL C/O FIRSTSERVICE RESIDENTIAL Address Address

5805 BLUE LAGOON DR. 310 5805 BLUE LAGOON DRIVE 310

City-State-Zip: City-State-Zip: MIAMI FL 33126 MIAMI FL 33126

Title **DIRECTOR** Title **TREASURER**

Name CAMACHO, ZAHILIS A Name FLORES, SORAYA

Address C/O FIRSTSERVICE RESIDENTIAL Address C/O FIRSTSERVICE RESIDENTIAL

5805 BLUE LAGOON DRIVE 310 5805 BLUE LAGOON DRIVE 310

City-State-Zip: MIAMI FL 33126 City-State-Zip: MIAMI FL 33126

Title ASSISTANT SECRETARY

Name GARCIA, YAHAIRA

C/O FIRSTSERVICE RESIDENTIAL Address

5805 BLUE LAGOON DRIVE 310

City-State-Zip: MIAMI FL 33126

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.

04/25/2016 SIGNATURE: SAENS DORCELY **PRESIDENT**

Date