## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010231

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

FILED
Apr 08, 2019
Secretary of State
0732215259CC

## **Current Principal Place of Business:**

C/O FIRSTSERVICE RESIDENTIAL FLORIDA 5805 BLUE LAGOON DRIVE SUITE 310 MIAMI, FL 33126

## **Current Mailing Address:**

C/O FIRSTSERVICE RESIDENTIAL FLORIDA 5805 BLUE LAGOON DRIVE SUITE 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 ARTRECHES, ZAHILIS A

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

5805 BLUE LAGOON DR. 310 5805 BLUE LAGOON DRIVE 310

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

Title TREASURER Title ASSISTANT SECRETARY

Name ORELLANA, SORAYA Name GARCIA, YAHAIRA

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

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

Date

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.