

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

DOCUMENT# N18000011208

**FILED**  
**Apr 19, 2019**  
**Secretary of State**  
**9564420456CC**

**Entity Name:** EHDOC LAS BRISAS TRACE CHARITABLE CORPORATION

**Current Principal Place of Business:**

C/O ELDERLY HOUSING DEVELOPMENT, AND OPERATIONS CORPORATION  
1580 SAWGRASS CORPORATE PKWY., STE.100  
FORT LAUDERDALE, FL 33323

**Current Mailing Address:**

C/O ELDERLY HOUSING DEVELOPMENT, AND OPERATIONS CORPORATION  
1580 SAWGRASS CORPORATE PKWY., STE.100  
FORT LAUDERDALE, FL 33323 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
FORT LAUDERDALE, FL 33324 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 C  
Name SHELTON, CHRISTOPHER M  
Address 1580 SAWGRASS CORPORATE PARKWAY SUITE 100  
City-State-Zip: FT LAUDERDALE FL 33323-2869

Title CE  
Name BAHR, MORTON  
Address 1580 SAWGRASS CORPORATE PARKWAY SUITE 100  
City-State-Zip: FT LAUDERDALE FL 33323-2869

Title VP  
Name ROMERO, EDWARD L  
Address 1580 SAWGRASS CORPORATE PARKWAY SUITE 100  
City-State-Zip: FT LAUDERDALE FL 33323-2869

Title S  
Name CORDONE, MARIA C  
Address 1580 SAWGRASS CORPORATE PARKWAY SUITE 100  
City-State-Zip: FT LAUDERDALE FL 33323-2869

Title T  
Name SCHMELZER, ERICA  
Address 1580 SAWGRASS CORPORATE PARKWAY SUITE 100  
City-State-Zip: FT LAUDERDALE FL 33323-2869

Title VP  
Name GERARD, LEO W  
Address 1580 SAWGRASS CORPORATE PARKWAY SUITE 100  
City-State-Zip: FT LAUDERDALE FL 33323-2869

*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: MORTON BAHR**

**CE**

**04/19/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date