## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000153583

Entity Name: VILLAS AT BRIGER, LLC

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

2199 PONCE DE LEON BLVD. SUITE 201 CORAL GABLES, FL 33134

## **Current Mailing Address:**

P.O. BOX 3435 WEST PALM BEACH, FL 33401 US

## FEI Number: 46-4279082

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

CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410 US

Certificate of Status Desired: No

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:	ARMANDO A. TABERNILLA	(	04/25/2017
	Electronic Signature of Registered Agent		Date

Ele	ctronic Signature	of Registered	Agent

# Authorized Person(s) Detail :

Title	PRESIDENT	Title	SENIOR VICE PRESIDENT
Name	FANJUL, JOSE F. JR.	Name	BLOMQVIST, ERIK J.
Address	P.O. BOX 3435	Address	P.O. BOX 3435
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401
Title Name Address City-State-Zip:	VP PORRO, JUAN P.O. BOX 3435 WEST PALM BEACH FL 33401	Title Name Address City-State-Zip:	VICE PRESIDENT & ASSISTANT SECRETARY ROSS, DANIEL D. P.O. BOX 3435 WEST PALM BEACH FL 33401
Title Name Address City-State-Zip:	VICE PRESIDENT & SECRETARY TABERNILLA, ARMANDO A. P.O. BOX 3435 WEST PALM BEACH FL 33401	Title Name Address City-State-Zip:	VICE PRESIDENT OF TAXATION ZUKOWSKI, PHILIP M. P.O. BOX 3435 WEST PALM BEACH FL 33401
Title Name Address City-State-Zip:	MANAGER FCI RESIDENTIAL CORPORATION 2199 PONCE DE LEON BLVD. SUITE 201 CORAL GABLES FL 33134	Title Name Address City-State-Zip:	VP, FINANCE & TREASURER LONDONO, ALEJANDRO P.O. BOX 3435 WEST PALM BEACH FL 33401

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

## SIGNATURE: ARMANDO A. TABERNILLA

VICE PRESIDENT

04/25/2017

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Apr 25, 2017 Secretary of State CC7808893362