2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16849

Entity Name: BROTHERS PROPERTY CORPORATION

Current Principal Place of Business:

TWO ALHAMBRA PLAZA SUITE 1280 CORAL GABLES, FL 33134

Current Mailing Address:

TWO ALHAMBRA PLAZA SUITE 1280 CORAL GABLES, FL 33134 US

FEI Number: 59-2840291

Name and Address of Current Registered Agent:

LUBAN, KENNETH A 35 OCEAN REEF DRIVE SUITE 200 KEY LARGO, FL 33037 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PD	Title	S
Name	FULLER, VICTOR L	Name	LUBAN, KENNETH A
Address	2 ALHAMBRA PLAZA, SUITE 1280	Address	35 OCEAN REEF DR, SUITE 200
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	KEY LARGO FL 33037
Title	т	Title	ASST. TREASURER
Name	WITZGALL, DAVID J	Name	ZBACNIK, ROBERT J
Address	301 E 4TH STREET	Address	301 E 4TH STREET
City-State-Zip:	CINCINNATI OH 45202	City-State-Zip:	CINCINNATI OH 45202
Title	D	Title	VDAS
Title Name	D VONDERHAAR, DANIEL J	Title Name	VDAS FULLER, STEPHEN M
	-		
Name	VONDERHAAR, DANIEL J 301 E 4TH STREET	Name	FULLER, STEPHEN M 2 ALHAMBRA PLAZA, SUITE 1280
Name Address	VONDERHAAR, DANIEL J 301 E 4TH STREET	Name Address	FULLER, STEPHEN M 2 ALHAMBRA PLAZA, SUITE 1280
Name Address City-State-Zip:	VONDERHAAR, DANIEL J 301 E 4TH STREET CINCINNATI OH 45202	Name Address City-State-Zip:	FULLER, STEPHEN M 2 ALHAMBRA PLAZA, SUITE 1280 CORAL GABLES FL 33134
Name Address City-State-Zip: Title	VONDERHAAR, DANIEL J 301 E 4TH STREET CINCINNATI OH 45202 DIRECTOR	Name Address City-State-Zip: Title	FULLER, STEPHEN M 2 ALHAMBRA PLAZA, SUITE 1280 CORAL GABLES FL 33134 DIRECTOR
Name Address City-State-Zip: Title Name	VONDERHAAR, DANIEL J 301 E 4TH STREET CINCINNATI OH 45202 DIRECTOR LINDNER, JR., S. CRAIG 301 E. 4TH ST.	Name Address City-State-Zip: Title Name	FULLER, STEPHEN M 2 ALHAMBRA PLAZA, SUITE 1280 CORAL GABLES FL 33134 DIRECTOR MARCIAN, DOUGLAS F 301 E. 4TH ST.

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT J ZBACNIK

ASSISTANT TREASURER 03/24/2015

Electronic Signature of Signing Officer/Director Detail

FILED Mar 24, 2015 Secretary of State CC9610976744

Date

Date