## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 736417** 

FILED Jan 22, 2009 Secretary of State

Entity Name: BRIAR VILLAGE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
9000 SW <sup>-</sup> SUITE 102 MIAMI, FL		T			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
9000 SW <sup>-</sup> SUITE 102 MIAMI, FL		ΪΤ			
FEI Number	: 59-2548707	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
MERRITT, ROGER 300-41 STREET, SUITE 218 MIAMI BEACH, FL 33140 US			FRISHER, STEVEN 7600 RED ROAD 305 SOUTH MIAMI, FL 33	7600 RED ROAD	
	named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: STEVEN FRISHER				01/22/2009	
	Electron	nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	ST ( TILNEY, GERN 9389 SW 130 : MIAMI, FL 331	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( SKOGSTAD, S 9380 SW 1323 MIAMI, FL 331	ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( COELHO, NICO 9364 SW 1323 MIAMI, FL 331	ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD ( JANSEN, BEAT 9209 SW 130T MIAMI, FL 331	H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( LANE, LOUIS 9231 SW 130 : MIAMI, FL 331		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BEATRIX JANSEN PD 01/22/2009