SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $150 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $500)

NONPROFIT CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
1995 JUL 13 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 743486 (3)

1. Corporation Name
BRIARLAKE HOMEOWNERS ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
13120 S.W. 90TH PLACE MIAMI FL 33176	13120 S.W. 90TH PLACE MIAMI FL 33176

3. Date Incorporated or Qualified: 06/30/1978
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-1976804 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **FILING FEE IS $61.25**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	25
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

FRISCHER, STEVEN, ESQUIRE
7600 RED RD
STE 224
SO MIAMI FL 33143

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	KOPPEN, ELLEN	1.2 NAME	MORA, EUGENE	
STREET ADDRESS	13137 SW 90 PL	1.3 STREET ADDRESS	13008 SW 91 Place	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	Miami, FL 33176	
TITLE	TD	2.1 TITLE	TD	☒ Change ☐ Addition
NAME	JORDAN, JONATHAN	2.2 NAME	NERENBERG, HARRY	
STREET ADDRESS	9158 SW 129 LN	2.3 STREET ADDRESS	13108 SW 90 Place	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	Miami, FL 33176	
TITLE	SD	3.1 TITLE	SD	☒ Change ☐ Addition
NAME	NEWMAN, MADELYNE	3.2 NAME	GOLL, ELIZABETH	
STREET ADDRESS	13173 SW 91 PL	3.3 STREET ADDRESS	9194 SW 132 Lane	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	Miami, FL 33176	
TITLE		4.1 TITLE	D	☒ Change ☐ Addition
NAME		4.2 NAME	RICHARDS, ROSALIE	
STREET ADDRESS		4.3 STREET ADDRESS	13024 SW 90 Court	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Miami, FL 33176	
TITLE		5.1 TITLE	D	☒ Change ☐ Addition
NAME		5.2 NAME	NEWMAN, MADELYNE	
STREET ADDRESS		5.3 STREET ADDRESS	13173 SW 91 Place	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Miami, FL 33176	
TITLE		6.1 TITLE	D	☒ Change ☐ Addition
NAME		6.2 NAME	BUDA, IRMA	
STREET ADDRESS		6.3 STREET ADDRESS	9144 SW 132 LANE	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	MIAMI, FL 33176	

CR2E037 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X Elizabeth Goll 7/6/95 (305) 246-5867
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0000276