

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749269

FILED
Apr 24, 2007
Secretary of State

Entity Name: LAS BRISAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

BMI
6015 MORROW ST., EAST, STE 107
JACKSONVILLE, FL 32217 US

New Principal Place of Business:

Current Mailing Address:

BMI
6015 MORROW ST. EAST #107
JACKSONVILLE, FL 32217 US

New Mailing Address:

FEI Number: 59-2182732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BANNING MANAGEMENT INC
6015 MORROW ST E 107
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: NADER, RANDY
Address: 14689 PLIMOSA DR
City-St-Zip: JACKSONVILLE, FL 32250

Title: VPD () Delete
Name: PUELO, ROSE
Address: 601 1ST STREET SOUTH #6D
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: PD () Delete
Name: SMITH, ROBERT
Address: 601 1ST STREET SOUTH #6F
City-St-Zip: JACKSONVILLE BEACH, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: NADER, RANDY
Address: 14689 PLIMOSA DR
City-St-Zip: JACKSONVILLE, FL 32250

Title: SEC (X) Change () Addition
Name: LIVERMORE, JANET
Address: 601 S 1ST STREET SOUTH #6F
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: PD (X) Change () Addition
Name: SMITH, ROBERT
Address: 601 1ST STREET SOUTH #7A
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: ROBERT SMITH

PD

04/24/2007

Electronic Signature of Signing Officer or Director

Date