

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 05, 2007
Secretary of State

DOCUMENT# 751445

Entity Name: LAS BRISAS OF BOCA HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**500 NE SPANISH RIVER BLVD
STE 18
BOCA RATON, FL 33433 US**New Principal Place of Business:****Current Mailing Address:**BEACON PROPERTY MANAGEMENT
500 NE SPANISH RIVER BLVD
BOCA RATON, FL 33431 US**New Mailing Address:****FEI Number:** 59-2570109**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WILLIS, ERNEST
C/O BEACON PROP. MGMT.
500 NE SPANISH RIVER BLVD #18
BOCA RATON, FL 33431 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:** VD () Delete
Name: DARRELL, KEITH
Address: 22095 LAS BRISAS CIRCLE #403
City-St-Zip: BOCA RATON, FL 33433**Title:** D () Delete
Name: SCHECHTER, MAURICE
Address: 22075 LAS BRISAS CIR #302
City-St-Zip: BOCA RATON, FL 33433**Title:** D () Delete
Name: HOOSKIN, JOHN
Address: 22085 LAS BRISAS CIR #214
City-St-Zip: BOCA RATON, FL 33433**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** VD (X) Change () Addition
Name: BUTLER, MARTY
Address: 22040 LAS BRISAS CIRCLE
City-St-Zip: BOCA RATON, FL 33433**Title:** PD (X) Change () Addition
Name: SCHECHTER, MAURICE
Address: 22075 LAS BRISAS CIR #302
City-St-Zip: BOCA RATON, FL 33433**Title:** SD (X) Change () Addition
Name: LEVY, DAVID
Address: 22064 LAS BRISAS CIR
City-St-Zip: BOCA RATON, FL 33433**Title:** TD () Change (X) Addition
Name: KALKSTEIN, HELENE
Address: 22085 LAS BRISAS CIRCLE #201
City-St-Zip: BOCA RATON, FL 33433**Title:** D () Change (X) Addition
Name: SHEMESH, SHLOMO
Address: 22028 LAS BRISAS CIRCLE
City-St-Zip: BOCA RATON, FL 33433

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: MAURICE SCHECHTER

PD

11/05/2007

Electronic Signature of Signing Officer or Director_____
Date