

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 30, 2010
Secretary of State

Entity Name: LAS BRISAS HOMEOWNERS ASSOCIATION OF PALM BEACH, INC.

Current Principal Place of Business:

C/O C.A.M.S
314 NE 3RD ST
BOYNTON BEACH, FL 33435

New Principal Place of Business:

Current Mailing Address:

C/O C.A.M.S
314 NE 3RD ST
BOYNTON BEACH, FL 33435

New Mailing Address:

FEI Number: 65-1053086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GELFAND, MICHAEL J ESQ.
GELFAND & ARPE, P.A.
1555 PALM BEACH LAKES BLVD., STE 1220
WEST PALM BEACH, FL 334012329 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: P
Name: FLYNN, DENNIS
Address: 185 LAS BRISAS CIRCLE
City-St-Zip: HYPOLUXO, FL 33462

Title: VP
Name: EPSTEIN, BURT
Address: 188 LAS BRISAS CIRCLE
City-St-Zip: HYPOLUXO, FL 33462

Title: D
Name: FOX, JOE
Address: 135 LAS BRISAS CIR
City-St-Zip: HYPOLUXO, FL 33462

Title: S
Name: SCHLESINGER, JANET
Address: 186 LAS BRISAS CIRCLE
City-St-Zip: HYPOLUXO, FL 33462

Title: T
Name: HECK, CHARLES
Address: 104 LAS BRISAS CIRCLE
City-St-Zip: HYPOLUXO, FL 33462

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

SIGNATURE: SHERI MCKENZIE

BKPR

03/30/2010

Electronic Signature of Signing Officer or Director

Date