

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001527

FILED
Mar 29, 2011
Secretary of State

Entity Name: LAS BRISAS CONDOMINIUM ASSOCIATION OF PALM COAST, INC.

Current Principal Place of Business:

100 SAN JUAN DRIVE
PALM COAST, FL 32137 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 351196
PALM COAST, FL 32137 US

New Mailing Address:

FEI Number: 04-3560628

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLAGLER PALM COAST PROPERTY MANAGEMENT, IN
50 LEANNI WAY
SUITE B6
PALM COAST, FL 32137 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: PD
Name: LEKIEN, HANS
Address: 70 SAN JUAN DRIVE D-101
City-St-Zip: PALM COAST, FL 32137 US

Title: D
Name: ABERCROMBIE, RICK
Address: P.O. BOX 1416
City-St-Zip: ORMOND BEACH, FL 32175 US

Title: TD
Name: EVITT, CYNDY
Address: 7850 STEPPINGSTONE LANE
City-St-Zip: OOLTEWAH, TN 37363 US

Title: VD
Name: ABREU, VICKI
Address: 80 SAN JUAN DRIVE #C204
City-St-Zip: PALM COAST, FL 32137 US

Title: SD
Name: JONIS, DAVID
Address: 966 COBBLESTONE DRIVE
City-St-Zip: ORANGE PARK, FL 32065 US

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: HANS LEKIEN

PRES

03/29/2011

Electronic Signature of Signing Officer or Director

Date