

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003276

FILED
Mar 20, 2012
Secretary of State

Entity Name: BRIAR BAY COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

3400 CELEBRATION BLVD
WEST PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

C/O KINGS MANAGEMENT SERVICES, INC.
1224 US HIGHWAY ONE, SUITE H
NORTH PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 54-2048997 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ALLIANCE CAS, LLC
1000 E. HALLANDALE BEACH BLVD
SUITE B-20
HALLANDALE BEACH, FL 33009 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: DOWLING, BRIAN
Address: P.O. BOX 32248
City-St-Zip: PALM BEACH GARDENS, FL 33420

Title: VP
Name: ZAKARIAN, EDOUARD
Address: P.O. BOX 32248
City-St-Zip: PALM BEACH GARDENS, FL 33420

Title: VP2
Name: KELLY, STACEY
Address: P.O. BOX 32248
City-St-Zip: PALM BEACH GARDENS, FL 33420

Title: S
Name: MAXINE, WILSON
Address: P.O. BOX 32248
City-St-Zip: PALM BEACH GARDENS, FL 33420

Title: T
Name: SIMEONE, ROBERT
Address: P.O. BOX 32248
City-St-Zip: PALM BEACH GARDENS, FL 33420

Title: D
Name: MICHAEL, BERTELLE
Address: P.O. BOX 32248
City-St-Zip: PALM BEACH GARDENS, FL 33420

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: BRUCE KING

MGR

03/20/2012

Electronic Signature of Signing Officer or Director

_____ Date