

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29897

FILED
Mar 12, 2011
Secretary of State

Entity Name: BRIARCREST HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

11940 FAIRWAY LAKES DR., SUITE 4
FORT MYERS, FL 33913 US

New Principal Place of Business:

Current Mailing Address:

11940 FAIRWAY LAKES DR., SUITE 4
FORT MYERS, FL 33913 US

New Mailing Address:

FEI Number: 65-0185742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NASSOLY, SHERRY CAM
11940 FAIRWAY LAKES DR., SUITE 4
FORT MYERS, FL 33913 US

Name and Address of New Registered Agent:

NASSOIY, SHERRY CAM
11940 FAIRWAY LAKES DR., SUITE 4
FORT MYERS, FL 33913 US

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: SHERRY NASSOIY

03/12/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DVP
Name: BARNES, SUSAN
Address: 15447 BRIARCREST CIRCLE
City-St-Zip: FORT MYERS, FL 33912 US

Title: DP
Name: ORTIZ, MIKE
Address: 15207 BRIARCREST CIRCLE
City-St-Zip: FORT MYERS, FL 33912 US

Title: DS
Name: BROOKMAN, TERRY
Address: 15424 BRIARCREST CIRCLE
City-St-Zip: FORT MYERS, FL 33912 US

Title: DT
Name: REICHART, LORI
Address: 15208 BRIARCREST CIRCLE
City-St-Zip: FORT MYERS, FL 33912 US

Title: D
Name: TEUSCHER, ROGER
Address: 15182 BRIARCREST CIRCLE
City-St-Zip: FORT MYERS, FL 33912 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: SHERRY NASSOIY

RA

03/12/2011

Electronic Signature of Signing Officer or Director

Date