

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006188

**FILED**  
**Mar 29, 2011**  
**Secretary of State**

**Entity Name:** LAS BRISAS TWIN VILLAS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

BENSON'S KT - C/O ASSOCIA  
5401 N CENTRAL EXPWY STE 300  
DALLAS, TX 75205

**New Principal Place of Business:**

**Current Mailing Address:**

BENSON'S KT  
3050 HORSESHOE DR N STE 275  
NAPLES, FL 34104

**New Mailing Address:**

**FEI Number:** 65-0560042      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BENSON'S KT  
3050 HORSESHOE DR N STE 275  
NAPLES, FL 34104    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: WHEELOCK, MAJOR  
Address: 3050 N. HORSESHOE DRIVE, #275  
City-St-Zip: NAPLES, FL 34104

Title: VP  
Name: DOUGLAS, EDWARD  
Address: 3050 N. HORSESHOE DRIVE, #275  
City-St-Zip: NAPLES, FL 34104

Title: TS  
Name: KESTER, JACK  
Address: 3050 N. HORSESHOE DRIVE, #275  
City-St-Zip: NAPLES, FL 34104

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: MAJOR WHEELOCK

P

03/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date