

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005620

FILED
Apr 23, 2012
Secretary of State

Entity Name: LAS BRISAS AT DORAL COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

10705 NW 33RD. STREET
100
DORAL, FL 33172

New Principal Place of Business:

10544 NW 26 STREET
E-104
DORAL, FL 33172

Current Mailing Address:

10705 NW 33RD. STREET
100
DORAL, FL 33172

New Mailing Address:

10544 NW 26 STREET
E-104
DORAL, FL 33172

FEI Number: 65-0910544

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE , P.A.
1900 N COMMERCE PKWY
WESTON, FL 33326 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: WATTS, WILLIAM A
Address: 5670 NW 116 AVE #210
City-St-Zip: DORAL, FL 33178

Title: DVP
Name: PENA, JAIME
Address: 5620 NW 114TH PATH # 214
City-St-Zip: DORAL, FL 33178

Title: TD
Name: MARTELLY, RALPH
Address: 5670 NW 116TH AVE. #207
City-St-Zip: DORAL, FL 33178

Title: VP
Name: BERTOT, JENNIFER
Address: 5640 NW 115TH COURT #205
City-St-Zip: DORAL, FL 33178

Title: DS
Name: TIRADO, CARLOS
Address: 5650 NW 115TH COURT # 106
City-St-Zip: DORAL, FL 33178

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: MARK A. PINILLA

MNGR

04/23/2012

Electronic Signature of Signing Officer or Director

Date