

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004268

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

Current Principal Place of Business:

1145 SAWGRASS CORPORATE PKWY
SUNRISE, FL 33323

Current Mailing Address:

1145 SAWGRASS CORPORATE PKWY
SUNRISE, FL 33323

FEI Number: 20-4748622

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAKALAR AND ASSOCIATES
150 S PINE ISLAND ROAD
SUITE 540
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PENA, FRANK
Address 1145 SAWGRASS CORP PKWY
City-State-Zip: SUNRISE FL 33323

Title VP
Name RODRIGUEZ, OSCAR
Address 1145 SAWGRASS CORP PKWY
City-State-Zip: SUNRISE FL 33323

Title TREASURER
Name FERNADEZ, JOSE
Address 1145 SAWGRASS CORP PKWY
City-State-Zip: SUNRISE FL 33323

Title SECRETARY
Name SALAZAR, CARLOS
Address 1145 SAWGRASS CORP PARKWAY
City-State-Zip: SUNRISE FL 33323

Title DIRECTOR
Name RUIZ, JAIME
Address 1145 SAWGRASS CORP PARKWAY
City-State-Zip: SUNRISE FL 33323

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: FRANK PENA

PRES

01/08/2014

Electronic Signature of Signing Officer/Director Detail

Date