

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26654

Entity Name: BRIARWOOD MASTER ASSOCIATION, INC.**Current Principal Place of Business:**C/O CASEY CONDO MANAGEMENT
4370 S. TAMiami TRL SUITE 102
SARASOTA, FL 34231**Current Mailing Address:**C/O CASEY CONDO MANAGEMENT
4370 S. TAMiami TRAIL SUITE 102
SARASOTA, FL 34231 US**FEI Number:** 65-0279178**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SPENCE, BRIDGET
4370 S. TAMiami TRAIL, SUITE 102
SARASOTA, FL 34231 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:** BRIDGET SPENCE

03/26/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	YOUNG, GIL
Address	C/O CASEY CONDO MANAGEMENT 4370 S. TAMiami TRL SUITE 102
City-State-Zip:	SARASOTA FL 34231

Title	TREASURER
Name	NILSSON, LENNI-LEE
Address	C/O CASEY CONDO MANAGEMENT 4370 S. TAMiami TRL SUITE 102
City-State-Zip:	SARASOTA FL 34231

Title	SECRETARY
Name	NILSSON, LENNI
Address	C/O CASEY CONDO MANAGEMENT 4370 S. TAMiami TRL SUITE 102
City-State-Zip:	SARASOTA FL 34231

Title	VP
Name	PHILIPS, JEFFREY
Address	C/O CASEY CONDO MANAGEMENT 4370 S. TAMiami TRL SUITE 102
City-State-Zip:	SARASOTA FL 34231

Title	SECRETARY
Name	MILLER, JASON
Address	C/O CASEY CONDO MANAGEMENT 4370 S. TAMiami TRL SUITE 102
City-State-Zip:	SARASOTA FL 34231

Title	DIRECTOR
Name	FIELDS, ROBERT
Address	C/O CASEY CONDO MANAGEMENT 4370 S. TAMiami TRAIL SUITE 102
City-State-Zip:	SARASOTA FL 34231

Title	ASST. SECRETARY
Name	SPENCE, BRIDGET
Address	C/O CASEY CONDO MANAGEMENT 4370 S. TAMiami TRAIL SUITE 102
City-State-Zip:	SARASOTA FL 34231

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: BRIDGET SPENCE

ASSISTANT SECRETARY 03/26/2021

Electronic Signature of Signing Officer/Director Detail

Date