

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719289

Entity Name: THE BRISTOL HOUSE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

528 BARCELONA AVE.
VENICE, FL 34285

Current Mailing Address:

C/O ANTARES GROUP, INC.
4195 S. TAMiami TRAIL, PMB #173
VENICE, FL 34293 US

FEI Number: 59-1432047

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANTARES GROUP, INC.
ANTARES GROUP, INC.
4195 S. TAMiami TRAIL, PMB #173
VENICE, FL 34293 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: CYNTHIA A. CONWAY

01/12/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name PARSONS, SHARON
Address 4195 S. TAMiami TR., PMB #173
City-State-Zip: VENICE FL 34293

Title S, D
Name SANTOS, BONNIE
Address 4195 S. TAMiami TR., PMB #173
City-State-Zip: VENICE FL 34293

Title VP
Name LEARY, BARBARA
Address 4195 S. TAMiami TR., PMB #173
City-State-Zip: VENICE FL 34293

Title TREASURER
Name CROTTY, JANICE
Address C/O ANTARES GROUP, INC.
4195 S. TAMiami TRAIL, PMB #173
City-State-Zip: VENICE FL 34293

Title DIRECTOR
Name LEESON, LINDA
Address C/O ANTARES GROUP, INC.
4195 S. TAMiami TRAIL, PMB #173
City-State-Zip: VENICE FL 34293

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: SHARON PARSONS

PRESIDENT

01/12/2015

Electronic Signature of Signing Officer/Director Detail

Date