## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 719289** 

Entity Name: THE BRISTOL HOUSE OWNERS ASSOCIATION, INC.

FILED
Jan 12, 2015
Secretary of State
CC9149481407

## **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 Title S, D

Name PARSONS, SHARON Name SANTOS, BONNIE

Address 4195 S. TAMIAMI TR., PMB #173 Address 4195 S. TAMIAMI TR., PMB #173

City-State-Zip: VENICE FL 34293 City-State-Zip: VENICE FL 34293

Title VP Title TREASURER

Name LEARY, BARBARA Name CROTTY, JANICE

Address 4195 S. TAMIAMI TR., PMB #173 Address C/O ANTARES GROUP, INC.

City-State-Zip: VENICE FL 34293

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

Electronic Signature of Signing Officer/Director Detail

01/12/2015 Date