

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000005969

**FILED  
Apr 02, 2019  
Secretary of State  
1008312816CC**

**Entity Name:** BARRINGTON HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1207 N HIMES AVE  
SUITE 3  
TAMPA, FL 33607

**Current Mailing Address:**

1207 N. HIMES AVE.  
SUITE 3  
TAMPA, FL 33607

**FEI Number: 01-0604383**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

UNIQUE PROPERTY SERVICES INC.  
1207 N. HIMES AVE,  
SUITE 3  
TAMPA, FL 33607 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           WRIGHT, SANDRA  
Address        9410 BARRINGTON OAKS DR  
City-State-Zip: DOVER FL 33527

Title           SECRETARY  
Name           EMMONS, SANDRA  
Address        9414 BARRINGTON OAKS DR  
City-State-Zip: DOVER FL 33527

Title           TREASURER  
Name           ULRICH, KRISTA  
Address        7120 MUCK POND RD.  
City-State-Zip: DOVER FL 33527

Title           MANAGER  
Name           ALVAREZ, WILLIAM  
Address        1207 N HIMES AVE  
                  STE.3  
City-State-Zip: TAMPA FL 33607

*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: ALVAREZ,WILLIAM**

**MANAGER**

**04/02/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date