

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008423

Entity Name: BULGARIAN AMERICAN CULTURAL CENTER - SARASOTA FL, INC.**FILED**
Apr 29, 2014
Secretary of State
CC5635337621**Current Principal Place of Business:**517 LUMINARY BLVD
OSPREY, FL 34229**Current Mailing Address:**517 LUMINARY BLVD
OSPREY, FL 34229**FEI Number: 27-1027209****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**GEORGIEVA, MARIANA I
517 LUMINARY BLVD
OSPREY, FL 34229 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 MRS.
Name STOYKA P. MINEV, PRESIDENT
Address 666 NORTH JEFFERSON AVE.
City-State-Zip: SARASOTA FL 34237

Title MRS.
Name KIRILOVA, KATYA S
Address 6856 MAUNA LOA BLVD.
City-State-Zip: SARASOTA FL 34241

Title MR.
Name GEORGE, ANGELOFF A
Address 4017 CROCKERS LAKE BLVD.
SUITE 1422
City-State-Zip: SARASOTA FL 34238

Title MRS.
Name GERGANNA NIKOLOVA
Address 517 LUMINARY BLVD
City-State-Zip: OSPREY FL 34229

Title MRS.
Name MARIANA, GEORGIEVA I
Address 517 LUMINARY BLVD.
City-State-Zip: OSPREY FL 34229

Title MRS.
Name DENITZA, PETROVA
Address 3710 HIGEL AVE.
City-State-Zip: SARASOTA FL 34242

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: GEORGE A ANGELOFF**BOARD MEMBER****04/29/2014**

Electronic Signature of Signing Officer/Director Detail

Date