

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000000917

**Entity Name:** BARTRAM PARK WEST HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

11945 SAN JOSE BLVD.  
JACKSONVILLE, FL 32223

**Current Mailing Address:**

C/O SOVEREIGN & JACOBS  
461 A1A BEACH BLVD.  
ST. AUGUSTINE, FL 32080 US

**FEI Number:** 47-3243992

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 P  
Name WARD, CHRISTOPHER  
Address C/O SOVEREIGN & JACOBS  
461 A1A BEACH BLVD.  
City-State-Zip: ST. AUGUSTINE FL 32080

Title VP  
Name CELLAR, WILL  
Address C/O SOVEREIGN & JACOBS  
461 A1A BEACH BLVD.  
City-State-Zip: ST. AUGUSTINE FL 32080

Title S  
Name WHITLEY, JOHN  
Address C/O SOVEREIGN & JACOBS  
461 A1A BEACH BLVD.  
City-State-Zip: ST. AUGUSTINE FL 32080

*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:** CHRISTOPHER WARD

**PRESIDENT**

**02/22/2017**

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

\_\_\_\_\_  
Date