

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28220

Entity Name: AVONDALE RESIDENTS ASSOCIATION, INC.**Current Principal Place of Business:**1940 ALTA VISTA ST
ATTN: JULIE GUIRGUIS
SARASOTA, FL 34236**Current Mailing Address:**1940 ALTA VISTA ST
ATTN: JULIE GUIRGUIS
SARASOTA, FL 34236 US**FEI Number:** 65-0070732**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GUIRGUIS, JULIE A
1940 ALTA VISTA ST
ATTN: JULIE GUIRGUIS
SARASOTA, FL 34236 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:** JULIE A GUIRGUIS

02/25/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP / ACTING PRESIDENT
Name RUFF, JEAN
Address 1960 LINCOLN DRIVE
City-State-Zip: SARASOTA FL 34236

Title SECRETARY
Name HOFF, ROB
Address 1930 ALTA VISTA STREET
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name CARDAMONE, MOLLIE
Address 1116 YALE AVENUE
City-State-Zip: SARASOTA FL 34236

Title TREASURER
Name GUIRGUIS, JULIE
Address 1940 ALTA VISTA STREET
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name FOURNIER, CAROL
Address 1124 BREWER PLACE
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name BAKER, PAM
Address 1900 LINCOLN DR
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name LOGAN, JAY
Address 1863 IRVING ST
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name KIMBROUGH, ROBERT
Address 1950 ALTA VISTA ST
City-State-Zip: SARASOTA FL 34236

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: JULIE A GUIRGUIS

TREASURER

02/25/2015

Electronic Signature of Signing Officer/Director Detail

Date