

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 27, 2007  
Secretary of State**

DOCUMENT# N05000000897

Entity Name: BRISTOL PINES COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

15122 SUMMIT PLACE CIRCLE  
NAPLES, FL 34119

**New Principal Place of Business:**

**Current Mailing Address:**

15122 SUMMIT PLACE CIRCLE  
NAPLES, FL 34119

**New Mailing Address:**

FEI Number: 20-4338495      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

EHG REGISTERED AGENTS INC  
5100 TOWN CENTER CIRCLE SUITE 430  
BOCA RATON, FL 33486 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: DAVENPORT, RICHARD  
Address: 15122 SUMMIT PLACE CIRCLE  
City-St-Zip: NAPLES, FL 34119

Title: DV ( ) Delete  
Name: SELIGMAN, BRIAN  
Address: 15122 SUMMIT PLACE CIRCLE  
City-St-Zip: NAPLES, FL 34119

Title: DS ( ) Delete  
Name: GOLAN, AMNON  
Address: 15122 SUMMIT PLACE CIRCLE  
City-St-Zip: NAPLES, FL 34119

Title: DT ( ) Delete  
Name: MILLER, ROBERT  
Address: 15122 SUMMIT PLACE CIRCLE  
City-St-Zip: NAPLES, FL 34119

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICHARD DAVENPORT

DP

04/27/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date