

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # N06000000258

1. Entity Name  
BRISTOL PARK BUSINESS CENTER CONDOMINIUM  
ASSOCIATION, INC.



Principal Place of Business  
4631 NW 53RD AVE  
STE 101  
GAINESVILLE, FL 32606

Mailing Address  
4631 NW 53RD AVE  
STE 101  
GAINESVILLE, FL 32606

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

WHITE, MELANIE C  
4631 NW 53RD AVE., STE 101  
GAINESVILLE, FL 32606

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

(Signature, typed or printed name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP  
NAME HAGOPIAN, ALAN M  
STREET ADDRESS 4631 NW 53RD AVE., STE. 101  
CITY-ST-ZIP GAINESVILLE, FL 32606

TITLE DVP  
NAME WEBER, RUSS  
STREET ADDRESS 4631 NW 53RD AVE., STE. 101  
CITY-ST-ZIP GAINESVILLE, FL 32606

TITLE DST  
NAME WHITE, MELANIE C  
STREET ADDRESS 4631 NW 53RD AVE., STE. 101  
CITY-ST-ZIP GAINESVILLE, FL 32606

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Alan M. Hagopian*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 9 2008 352-375-4517  
Date Daytime Phone #

40000905



01092008 No Chg-NP CR2E037 (4/06)

4. FEI Number 20-4034674	Applied For Not Applicable
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5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
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