

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005902

FILED
Apr 03, 2009
Secretary of State

Entity Name: THE BRISTOL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1350 PENNSYLVANIA AVENUE
#210
MIAMI BEACH, FL 33139

New Principal Place of Business:

1350 PENNSYLVANIA AVENUE
MIAMI BEACH, FL 33139

Current Mailing Address:

C/O DEJA VU PROPERTIES
P.O. BOX 191904
MIAMI BEACH, FL 33119

New Mailing Address:

C/O FX MANAGEMENT, INC.
407 LINCOLN ROAD, SUITE 6G
MIAMI BEACH, FL 33139

FEI Number: 65-0591355

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTLETT, SHERRY T
6140 SW 45TH ST.
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

FX MANAGEMENT, INC.
407 LINCOLN ROAD
SUITE 6G
MIAMI BEACH, FL 33139 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: DORIS E. BERRIZ

04/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLAIR, TIM
Address: 1350 PENNSYLVANIA AVE #210
City-St-Zip: MIAMI BEACH, FL 33139

Title: S () Delete
Name: CRAVEN, LAURA
Address: 1350 PENNSYLVANIA AVE #202
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP () Delete
Name: EPSTEIN, MARC
Address: P.O. BOX 981
City-St-Zip: ASBURY PARK, NJ 07712

Title: T () Delete
Name: MELENKEVITZ, JAMES
Address: 1350 PENNSYLVANIA AVE., #204
City-St-Zip: MIAMI BEACH, FL 33139

Title: D (X) Delete
Name: WRIGHT, KATHLEEN
Address: 1350 PENNSYLVANIA AVE., #2-2
City-St-Zip: MIAMI BEACH, FL 33139

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:

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: TIM BLAIR

P

04/03/2009

Electronic Signature of Signing Officer or Director

Date