

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
AMOUNT DUE ON OR BEFORE 9/17/97: \$81.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED  
Sep 10 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000004222 (3)**

1. Corporation Name

**BRISITOL LAKES HOMEOWNERS ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

10100 WEST SAMPLE ROAD, SUITE 205  
CORAL SPRINGS FL 33065

10100 WEST SAMPLE ROAD, SUITE 205  
CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/08/1996

3a. Date of Last Report

2. Principal Place of Business

21 **951 Broken Sound Pkwy**

Suite, Apt. #, etc.

22 **250**

City & State

23 **BOCA RATON FL**

Zip

24 **33434**

Country

25 **Palm Beach**

2a. Mailing Address

26 **951 Broken Sound Pkwy**

Suite, Apt. #, etc.

27 **250**

City & State

28 **BOCA RATON FL**

Zip

29 **33434**

Country

30 **Palm Beach**

4. FEI Number

**Applied For**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TRANTALIS, DEAN J ESQ.  
8724 WEST SAMPLE ROAD  
CORAL SPRINGS FL 33065

81 Name

**COMMUNITY ASSOCIATION SERVICES**

82 Street Address (P.O. Box Number is Not Acceptable)

**951 BROKEN SOUND PKWY**

83 **STE 250**

84 City

**BOCA RATON**

FL

85 Zip Code

**33487**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

*Dean J. Trantalis*

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE

NAME **CUMBER, AFTAB A**  
STREET ADDRESS **10100 WEST SAMPLE ROAD, SUITE 205**  
CITY-ST-ZIP **CORAL SPRINGS FL 33065**

TITLE **VSTD** ☒ DELETE

NAME **CUMBER, GUL**  
STREET ADDRESS **10100 WEST SAMPLE ROAD, SUITE 205**  
CITY-ST-ZIP **CORAL SPRINGS FL 33065**

TITLE **AVD** ☒ DELETE

NAME **RAYANI, SHAMS**  
STREET ADDRESS **10100 WEST SAMPLE ROAD, SUITE 205**  
CITY-ST-ZIP **CORAL SPRINGS FL 33065**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☒ Change ☐ Addition

1.2 NAME **Jim Marshall**  
1.3 STREET ADDRESS **951 Broken Sound Parkway, Suite 250**  
1.4 CITY-ST-ZIP **BOCA RATON, FL 33434**

2.1 TITLE **VSTD** ☒ Change ☐ Addition

2.2 NAME **Phil Weiss**  
2.3 STREET ADDRESS **951 Broken Sound Parkway, Suite 250**  
2.4 CITY-ST-ZIP **BOCA RATON, FL 33434**

3.1 TITLE **AVD** ☒ Change ☐ Addition

3.2 NAME **Joe Marshall**  
3.3 STREET ADDRESS **951 Broken Sound Parkway, Suite 250**  
3.4 CITY-ST-ZIP **BOCA RATON, FL 33434**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

*Dean J. Trantalis*

9-11-97

94-994-178A

CR2E037 (4/97)