

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000007129

Entity Name: BLISS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**C/O FIRSTSERVICE RESIDENTIAL
2870 SCHERER DRIVE NORTH SUITE 100
ST PETERSBURG, FL 33701**Current Mailing Address:**C/O FIRSTSERVICE RESIDENTIAL
2870 SCHERER DRIVE NORTH SUITE 100
ST PETERSBURG, FL 33701 US**FEI Number:** 81-3325699**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ZACUR, RICHARD A
5200 CENTRAL AVE
ST PETERSBURG, FL 33707 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:** RICHARD ZACUR**02/05/2020**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name LENARD, PETER
Address C/O FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DRIVE NORTH SUITE
 100
City-State-Zip: ST PETERSBURG FL 33701

Title DIRECTOR
Name STERKER, GERALD
Address 176 4TH AVENUE NORTHEAST
City-State-Zip: ST PETERSBURG FL 33701

Title DIRECTOR
Name RICE, DAVID
Address C/O FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DRIVE NORTH SUITE
 100
City-State-Zip: ST PETERSBURG FL 33701

Title VP
Name SPECTOR, SCOTT
Address 176 4TH AVENUE NORTHEAST
City-State-Zip: ST PETERSBURG FL 33701

Title SECRETARY
Name NOHLGREN, SARAH
Address 176 4TH AVENUE NE
City-State-Zip: ST PETERSBURG FL 33701

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: SCOTT SPECTOR**VICE PRESIDENT****02/05/2020**

Electronic Signature of Signing Officer/Director Detail

Date