2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#713388

FILED Jan 08, 2009 Secretary of State

Entity Name: COLONY BAY HARBOR CONDOMINIUM, INC.

Current Principal Place of Business: New Principal Place of Business: 9250 WEST BAY HARBOR DRIVE BAY HARBOR ISLANDS, FL 33154 **Current Mailing Address: New Mailing Address:** 9250 WEST BAY HARBOR DRIVE BAY HARBOR ISLANDS, FL 33154 FEI Number: 59-1202745 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILLCOX, CHARLES V. PRES 9250 WEST BAY HARBOR DRIVE, #6A BAY HARBOR ISLANDS, FL 33154 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WILLCOX, CHARLOTTE S TREASUR Name: Name: 9250 W. BAY HARBOR DR #6A Address: Address: City-St-Zip: BAY HARBOR IS, FL 33154 City-St-Zip: Title: () Delete Title: () Change () Addition BAILEY, DARYL SECRETA Name: Name: Address: 28728 SETLERS LN Address: City-St-Zip: PEPPER PIKE, OH 44124 City-St-Zip: Title: () Delete Title: (X) Change () Addition BOGADA, ESTELLA B. MEMB BALANZA, LEONAR B. MEMB Name: Name: 9250 W BAY HARBOR DR 4D Address: 9250 W BAY HARBOR DR 7B Address: City-St-Zip: BAY HARBOR ISLAND, FL 33154 City-St-Zip: BAY HARBOR ISLAND, FL 33154 () Delete Title: Title: () Change () Addition Name: GROSSMAN, GREGG PRESIDE Name: 1646 SOUTH BAYSHORE DRIVE Address: Address: City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip: Title: () Delete Title: () Change () Addition WILLCOX, CHARLES VICE PR Name: Name: 9250 W BAY HARBOR DR 6A Address: Address: City-St-Zip: BAY HARBOR ISLAND, FL 33154 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: CHARLOTTE WILLCOX T 01/08/2009