

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 723594

FILED
Apr 21, 2003
Secretary of State

Entity Name: BAYWAY ISLES-POINT BRITTANY FIVE CORPORATION

Current Principal Place of Business:

5055 BRITTANY DR., SOUTH
ST. PETERSBURG, FL 337151501 US

New Principal Place of Business:

Current Mailing Address:

5055 BRITTANY DR., SOUTH
ST. PETERSBURG, FL 337151501 US

New Mailing Address:

FEI Number: 59-1514722 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOCH, KARIN
5055 BRITTANY DRIVE, SOUTH
ST PETERSBURG, FL 33715

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: MOYER, PHIL
Address: 5220 BRITTANY DRIVE, S., SUITE 801
City-St-Zip: ST PETERSBURG, FL 33715

Title: T () Delete
Name: LEVIN, STAN
Address: 5220 BRITTANY DRIVE SOUTH
City-St-Zip: ST. PETERSBURG, FL

Title: D () Delete
Name: CREST, LOUISE
Address: 5220 BRITTANY DRIVE, S, #402
City-St-Zip: ST PETERSBURG, FL 33715

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: MOYER, PHIL
Address: 5220 BRITTANY DRIVE SOUTH
City-St-Zip: ST PETERSBURG, FL 33715

Title: PD (X) Change () Addition
Name: LEVIN, STAN
Address: 5220 BRITTANY DRIVE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33715

Title: VPD (X) Change () Addition
Name: MCKENZIE, ANDREA
Address: 5220 BRITTANY DRIVE SOUTH
City-St-Zip: ST PETERSBURG, FL 33715

Title: D () Change (X) Addition
Name: GASKILL, ED
Address: 5220 BRITTANY DRIVE SOUTH
City-St-Zip: ST PETERSBURG, FL 33715

Title: SD () Change (X) Addition
Name: HOFMANN, JUNE
Address: 5220 BRITTANY DRIVE SOUTH
City-St-Zip: ST PETERSBURG, FL 33715

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STAN LEVIN

PD

04/21/2003

Electronic Signature of Signing Officer or Director

_____ Date