2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740475

FILED Feb 21, 2011 Secretary of State

Entity Name: BAY HARBOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3366 N KEY DR

NORTH FT MYERS, FL 33903

Current Mailing Address: New Mailing Address:

C/O SILVERCRESTED MANAGEMENT, LLC P.O. BOX 1848 FORT MYERS, FL 33902 US

FEI Number: 59-1639672 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:

SILVERCRESTED MANAGEMENT LLC 3436 MARINATOWN LANE 1ST FL UNIT 4 NORTH FORT MYERS, FL 33903 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: SD

Name: WALTER, KATHLEEN

Address: 3354 NORTH KEY DRIVE #F-8 City-St-Zip: NORTH FORT MYERS, FL 33903

Title: PD

 Name:
 ADAMS, THEODORE

 Address:
 3384 NORTH KEY DRIVE A7

 City-St-Zip:
 NORTH FORT MYERS, FL 33903

Title: TD

 Name:
 COULTHARD, MARYANN

 Address:
 3368 NORTH KEY DRIVE #E-7

 City-St-Zip:
 NORTH FORT MYERS, FL 33903

Title:

 Name:
 CREMEANS, STEPHEN

 Address:
 3392 NORTH KEY DRIVE #B-3

 City-St-Zip:
 NORTH FORT MYERS, FL 33903

Title: VD

Name: ZASTROW, LOIS

Address: 3368 NORTH KEY DRIVE E2
City-St-Zip: NORTH FORT MYERS, FL 33903

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: THEODORE ADAMS PD 02/21/2011