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Feb 07 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 760069 (5)

1. Corporation Name

BAY FOREST HOMEOWNERS ASSOCIATION, INC. COMMONS ONE



Principal Place of Business

Mailing Address

15531 ROYAL FERN LN. N.
NAPLES FL 33963

15531 ROYAL FERN LN. N.
NAPLES FL 34110-8045

3. Date Incorporated or Qualified
09/15/1981

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 2373-75 DAVIS BLVD.

22 City & State

27 NAPLES, FL 34104

23 Zip

Country

28 Zip

Country

24

25

29 34104

30 COLLIER

4. FEI Number

36-3495910

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

A.S. DARR & ASSOC INC
2373-75 DAVIS BLVD
ARTHUR S. DARR
NAPLES FL 33942

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD WALLACE, BUD DELETE
NAME
STREET ADDRESS 15531 ROYAL FERN LN. N.
CITY-ST-ZIP NAPLES FL 33963

1.1 TITLE PD Change Addition
1.2 NAME NICHOLAS P. KIMBIS
1.3 STREET ADDRESS 15505 ROYAL FERN LANE
1.4 CITY-ST-ZIP NAPLES, FL 34110

TITLE TD ROYAL, RALPH DELETE
NAME
STREET ADDRESS 15455 ROYAL FERN LN. N. #38
CITY-ST-ZIP NAPLES FL 33963 34110

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE SD LINDAHL, CLAES DELETE
NAME
STREET ADDRESS 15455 ROYAL FERN LN. N. #37
CITY-ST-ZIP NAPLES FL 33963 34110

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
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: *Michael P. Kimbis*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone # 0069003

CR2E037 (9/96)