

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760069

FILED
Apr 28, 2009
Secretary of State

Entity Name: BAY FOREST HOMEOWNERS ASSOCIATION, INC. COMMONS ONE

Current Principal Place of Business:

15531 ROYAL FERN LN. N.
NAPLES, FL 34-710

New Principal Place of Business:

Current Mailing Address:

% FINANCIAL MANAGEMENT SERVICES
P.O. BOX 11496
NAPLES, FL 341011496 US

New Mailing Address:

FEI Number: 36-3495910 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FINANCIAL MANAGEMENT SERVICES, INC.
5020 TAMIAMI TRAIL N
#110
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

FINANCIAL MANAGEMENT SERVICES, INC.
1250 9TH STREET NORTH
#307
NAPLES, FL 34101 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

04/28/2009

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FRIEDMAN, MARTIN
Address: 15455 ROYAL FERN LANE #24
City-St-Zip: NAPLES, FL 34110

Title: SD () Delete
Name: BURKE, ED
Address: 15345 WIMBORNE LANE
City-St-Zip: NAPLES, FL 34110

Title: DT () Delete
Name: STAMM, TONI
Address: 15529 ROYAL FERN LANE
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: DAWN MCCULLOUGH

Electronic Signature of Signing Officer or Director

ACCT

04/28/2009

Date