

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90198 016 ****61.25

DOCUMENT # 760071



1. Entity Name
BAY FOREST HOMEOWNERS ASSOCIATION, INC.
COMMONS THREE

Principal Place of Business
463 TORREY PINES PT
NAPLES, FL 34113 US

Mailing Address
463 TORREY PINES PT
NAPLES, FL 34113 US

60034111



04282006 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0578359	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

FOREMAN, GEORGE
463 TORREY PINES PT
NAPLES, FL 34113

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD NIELSON, ARNE 15185 STORRINGTON PLACE, # D100 NAPLES, FL 34110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TYBURSKI, MAUREEN 15209 STORRINGTON PL #B200 NAPLES, FL 34110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CHYLLA, MARILYN 15117 ROYAL FERN COURT #A-201 NAPLES, FL 34110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOREMAN, GEORGE 5067 TAMAMI TRAIL E. NAPLES, FL 34113
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *George Foreman* **George FOREMAN** *4-18-2006*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #