

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760928

FILED
Jan 07, 2009
Secretary of State

Entity Name: BAY LAKES AT GRANADA HOMEOWNERS' ASSOCIATION,INC

Current Principal Place of Business:

8043 HOOK CIRCLE
P O BOX 690284
ORLANDO, FL 328697284 US

New Principal Place of Business:

8043 HOOK CIRCLE
ORLANDO, FL 328697284 US

Current Mailing Address:

8043 HOOK CIRCLE
P O BOX 690284
ORLANDO, FL 328690284 US

New Mailing Address:

8043 HOOK CIRCLE
ORLANDO, FL 328690284 US

FEI Number: 59-2155255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHARLES E. SAMUEL
8043 HOOK CIRCLE
ORLANDO, FL 32836 US

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: STD () Delete
Name: SAMUEL ED, C.,
Address: 8043 HOOK CIRCLE
City-St-Zip: ORLANDO, FL 32836

Title: PD () Delete
Name: MULLENIX,CATHY,
Address: 8030 CALABRIA CT
City-St-Zip: ORLANDO, FL 32836

Title: VD () Delete
Name: JONES, MIKE
Address: 8415 PAJARO COURT
City-St-Zip: ORLANDO, FL 32836

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: MULLENIX, CATHY,
Address: 8030 CALABRIA CT
City-St-Zip: ORLANDO, FL 32836

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: CATHY MULLENIX

PD

01/07/2009

Electronic Signature of Signing Officer or Director

Date