

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90303 031 ***150.00

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03072005 Chg-P CR2E034 (10/03)

DOCUMENT # G95288					
1. Entity Name BAYS END MANOR MOBILE HOMEOWNER'S ASSOCIATION, INC.					
Principal Place of Business 3432 STATE ROAD 580 SAFETY HARBOR, FL 34695		Mailing Address 3432 STATE ROAD 580 SAFETY HARBOR, FL 34695			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number NOT APPLICABLE	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
JARVIS, CHARLES 3432 SR 580 LOT 323 SAFETY HARBOR, FL 34695			Name SALVATORE J. MARINO - TREASURER Street Address (P.O. Box Number is Not Acceptable) 3432 STATE ROAD 580 UNIT #213 City SAFETY HARBOR FL Zip Code 34695		
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 <i>Salvatore J. Marino</i>		Signature, typed or printed name of registered agent and title if applicable.		SALVATORE J. MARINO - TREASURER DATE 4-18-2005	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	VP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	JEFFREY, WILLIAM A	NAME			
STREET ADDRESS	3432 STATE RD 580, #111	STREET ADDRESS			
CITY-ST-ZIP	SAFETY HARBOR, FL 34695	CITY-ST-ZIP			
TITLE	P <input checked="" type="checkbox"/> Delete	TITLE	P (PRESIDENT) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	JARVIS, CHARLES	NAME	WILLIAM CARR		
STREET ADDRESS	3432 STATE RD 580, #323	STREET ADDRESS	3432 STATE ROAD 580 - #133		
CITY-ST-ZIP	SAFETY HARBOR, FL 34695	CITY-ST-ZIP	SAFETY HARBOR, FLORIDA 34695		
TITLE	T <input checked="" type="checkbox"/> Delete	TITLE	T (TREASURER) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	RUBSAM, CATHERINE	NAME	SALVATORE J. MARINO		
STREET ADDRESS	3432 STATE RD 580, #113	STREET ADDRESS	3432 STATE ROAD 580 - #213		
CITY-ST-ZIP	SAFETY HARBOR, FL 34695	CITY-ST-ZIP	SAFETY HARBOR, FLORIDA 34695		
TITLE	S <input checked="" type="checkbox"/> Delete	TITLE	S (SECRETARY) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BEELER, CARL	NAME	STU DAVIS		
STREET ADDRESS	3432 STATE RD. 580, #224	STREET ADDRESS	3432 STATE ROAD 580 - #302		
CITY-ST-ZIP	SAFETY HARBOR, FL 34695	CITY-ST-ZIP	SAFETY HARBOR, FLORIDA 34695		
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I 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 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 607, 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: <i>Salvatore J. Marino</i>		Signature, typed or printed name of signing officer or director		SALVATORE J. MARINO Date 4-18-2005 Daytime Phone # 727-723-2191	
		TREASURER			