

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005085

FILED
Jan 05, 2009
Secretary of State

Entity Name: BAYSIDE ESTATES OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

644 FLORIDA AVE UNIT C
UNIT G
PANAMA CITY, FL 32401

New Principal Place of Business:

644 FLORIDA AVE
UNIT D
PANAMA CITY, FL 32401

Current Mailing Address:

PO BOX 1306
PANAMA CITY, FL 32402

New Mailing Address:

FEI Number: 20-0565737 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, ELIZABETH
644 FLORIDA AVE UNIT G
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

GALLINA, ANTHONY
644 FLORIDA AVE UNIT D
PANAMA CITY, FL 32401 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: ANTHONY M. GALLINA 01/05/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: GALLINA, A.M.
Address: 644 FLORIDA AVE UNIT D
City-St-Zip: PANAMA CITY, FL 32401

Title: S/T () Delete
Name: FRIDLEY, RANDY
Address: 644 FLORIDA AVE UNIT E
City-St-Zip: PANAMA CITY, FL 32401

Title: P () Delete
Name: MOORE, ELIZABETH
Address: 644 FLORIDA AVE UNIT G
City-St-Zip: PANAMA CITY, FL 32401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S/T (X) Change () Addition
Name: MOORE, ELIZABETH
Address: 644 FLORIDA AVE UNIT D
City-St-Zip: PANAMA CITY, FL 32401

Title: P (X) Change () Addition
Name: FRIDLEY, RANDY
Address: 644 FLORIDA AVE UNIT E
City-St-Zip: PANAMA CITY, FL 32401

Title: VP (X) Change () Addition
Name: MOORE, ELIZABETH
Address: 644 FLORIDA AVE UNIT D
City-St-Zip: PANAMA CITY, FL 32401

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: ANTHONY M. GALLINA VP 01/05/2009
Electronic Signature of Signing Officer or Director Date