2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008754

FILED Mar 18, 2005 Secretary of State

Entity Name: BAY COURT CONDOMINIUM ASSOCIATION INC

Enuty Nai	ne: barcoc	IRT CONDOMINIUM ASSOCIA	ATION, INC.		
Current P	rincipal Place	of Business:	New Principal Plac	New Principal Place of Business:	
6905 BAY I MIAMI BEA	DRIVE ACH, FL 33141	l			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
C/O BLUE SKY 723 14TH PLACE, #9 MIAMI BEACH, FL 33139			820 EUCLID AVE	C/O BLUE SKY MIAMI 820 EUCLID AVE MIAMI BEACH, FL 33139	
FEI Number:	02-0708404	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
BLUE SKY REAL ESTATE MANAGEMENT, INC. 723 14TH PLACE, #9 MIAMI BEACH, FL 33139 US			GOMEZ, MICHAEL 1930 TYLER ST HOLLYWOOD, FL :	33020 US	
	named entity s of Florida.	submits this statement for the p	ourpose of changing its registe	red office or registered agent, or both,	
SIGNATURE: GOMEZ/RMS				03/18/2005	
	Electron	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () BIETERMAN, SI 6915 BAY DRIV MIAMI BEACH,	'E, #1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () CANINO, CARL 6915 BAY DRIV MIAMI BEACH,	'E, # 6	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () ROBERSON, VI 6905 BAY DRIV MIAMI BEACH,	'E, #16	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete MATHIS, LISA 6905 BAY DRIVE, #14 : MIAMI BEACH, FL 33141		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () GONZALEZ, AR 6915 BAY DRIV MIAMI BEACH,	Έ, # 8	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GONZALEZ/RMS D 03/18/2005