

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008754

FILED
Jan 04, 2008
Secretary of State

Entity Name: BAY COURT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6905 BAY DRIVE
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

C/O BLUE SKY MIAMI
1680 MICHIGAN AVENUE
MIAMI BEACH, FL 33139

New Mailing Address:

P.O. BOX 414537
MIAMI BEACH, FL 33141

FEI Number: 02-0708404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAXBERG, BARRY I
25 SE 2ND AVENUE
730
MIAMI, FL 33131 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: T () Delete
Name: BIETERMAN, SUSAN
Address: 6915 BAY DRIVE, #1
City-St-Zip: MIAMI BEACH, FL 33141

Title: VP () Delete
Name: CANINO, CARLOS
Address: 6915 BAY DRIVE, #6
City-St-Zip: MIAMI BEACH, FL 33141

Title: D () Delete
Name: ANTANOPOULOS, THOMAS
Address: 6905 BAY DRIVE, # 9
City-St-Zip: MIAMI BEACH, FL 33141

Title: D (X) Delete
Name: THOMAS, ANTANOPOULUS
Address: 6905 BAY DRIVE,
City-St-Zip: MIAMI BEACH, FL 33141

Title: P () Delete
Name: WAGNER, SCOTT B
Address: 6905 BAY DR APT 9
City-St-Zip: MIAMI BEACH, FL 33141

Title: S () Delete
Name: ROBERSON, VERONICA
Address: 6905 BAY DR APT 16
City-St-Zip: MIAMI BEACH, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: ANTANOPOULOS, THOMAS
Address: 6905 BAY DRIVE, APT 22
City-St-Zip: MIAMI BEACH, FL 33141

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

Title: P (X) Change () Addition
Name: WAGNER, B. SCOTT
Address: 6905 BAY DR APT 9
City-St-Zip: MIAMI BEACH, FL 33141

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: B. SCOTT WAGNER

P

01/04/2008

Electronic Signature of Signing Officer or Director

Date