


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2008 08:00 A
Secretary of State

DOCUMENT # N04000004028 1. Entity Name BAY COLONY MARINA CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 500 BAY COLONY DRIVE NORTH JUNO BEACH, FL 33408	Mailing Address 500 BAY COLONY DRIVE NORTH JUNO BEACH, FL 33408
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DO NOT WRITE IN THIS SPACE



01092008 No Chg-NP CR2E037 (4/06)

4. FEI Number 43-2072212	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**FILLORAMO, NICHOLAS
114 BAY COLONY DRIVE NORTH
JUNO BEACH, FL 33408**

**DO NOT WRITE
IN THIS SPACE**

6. 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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	V SCHNIEDER, ALBERT 544 BAY COLONY DRIVE NORTH JUNO BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P FILLARAMO, NICHOLAS 114 BAY COLONY DRIVE NORTH JUNO BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S FLETCHER, VINCENT 16 ARKANSAS AVE OCEAN CITY, NJ 08226
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T VAN IDERSTINE, CONSTANCE 535 BAY COLONY DRIVE NORTH JUNO BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D O'CONNELL, THOMAS 1009 SOUTH PINCKNEY ROAD HOWELL, MI 48843
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

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01/28/08-80018-004 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Nicholas Filloramo Date Jan 10, 2008 (501) 622-6081

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR