

DOCUMENT# N06000007033

Entity Name: BAY VISTA OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

9002 SAN MARCO CT.
ORLANDO, FL 328198600

New Principal Place of Business:**Current Mailing Address:**

9002 SAN MARCO CT.
ORLANDO, FL 328198600

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 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: PTD () Delete
Name: THOMAS, THORP
Address: 9002 SAN MARCO CT.
City-St-Zip: ORLANDO, FL 32819

Title: VPD () Delete
Name: BILLUPS, REG
Address: 9002 SAN MARCO CT.
City-St-Zip: ORLANDO, FL 32819

Title: SD () Delete
Name: TEMPLE-CARTER, PAULETTE
Address: 9002 SAN MARCO CT.
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: HO, JONHATHAN
Address: 9002 SAN MARCO CT.
City-St-Zip: ORLANDO, FL 32819

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

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: PAULETTE CARTER

SD

03/24/2009

Electronic Signature of Signing Officer or Director

Date _____