2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Jul 21, 2005 8:00 am Secrétary of State DOCUMENT # N11832 07-21-2005 90026 011 ****61.25 BAWOODS II HOME OWNER'S ASSOCIATION, INC. Principal Place of Business Mailing Address 3108 GLENWOOD COURT SAFETY HARBOR FL 34695 P.O.BOX 1113 SAFETY HARBOR FL 34695 **2005654**0 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) 4. FEI Number Applied For City & State City & State 59-2588404 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GRIFFIN, HAROLD H Street Address (P.O. Box Number is Not Acceptable) 1455 COURT STREET CLEARWATER FL 33516 Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. TITLE ☐ Delete TITLE Change ☐ Addition HENDESS, SUSAN NAME 3105 ASHWOOD LANE STREET ADDRESS STREET ADDRESS SAFETY HARBOR FL 34695 CITY-ST-ZIP CITY-SI-ZIP πb, Addition Change TILLE Delete TITLE Cheever Mary 3107 Bentwood KARTOVICKY, EDIE NAME NAME 212 WOODLAND COURT STREET ADDRESS STREET ADDRESS SAFETY HARBOR FL CITY-ST-ZIP CITY-ST-7IP 🔀 Detete Change Addition LUVONE, BRIAN Sunford, Susan NAME NAME 3048 GLENWOOD CRT 113 Oak Crest Dr. STREET ADDRESS STREET ADDRESS CITY-ST-7IP SAFETY HARBOR FL 34695 CITY-ST-ZIP tety Harbor FL 34695 ☐ Delete Change Addition TITLE THE BROWN, ELIZABETH NAME NAME 3108 GLENWOOD COURT STREET ADDRESS STREET ADDRESS SAFETY HARBOR FL CITY-ST-7IP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition ☐ Defete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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.

FILED