## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N11832

FILED Mar 07, 2009 Secretary of State

Entity Name: BAWOODS II HOME OWNER'S ASSOCIATION, INC. **New Principal Place of Business: Current Principal Place of Business:** 3107 ASHWOOD LANE SAFETY HARBOR, FL 34695 **Current Mailing Address: New Mailing Address:** P.O.BOX 1113 SAFETY HARBOR, FL 34695 FEI Number: 59-2588404 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KOLOSVARY, PETE 3107 ASHWOOD LANE SAFETY HARBOR, FL 34695 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KOLOSVARY, PETE Name: Name: Address: 3107 ASHWOOD LANE Address: City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: Title: () Delete Title: () Change () Addition Name: WATSON, GINGER Name: Address: 312 WOODLAND COURT Address: City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: Title: () Delete Title: () Change () Addition KARTOVICKY, EDIE Name: Name: 212 WOODLAND COURT Address: Address: City-St-Zip: SAFETY HARBOR, FL 34695 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: EDIE KARTOVICKY TD 03/07/2009