

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17793

FILED
Feb 11, 2008
Secretary of State

Entity Name: BAYSIDE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1834 STATE ROAD 13 NORTH
SWITZERLAND, FL 32259

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 57201
JACKSONVILLE, FL 32241

New Mailing Address:

FEI Number: 59-2843382 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEBB, CASEY
8036 PHILIPS HIGHWAY, SUITE 6
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

WEBB, CASEY
111 NATURE WALK PARKWAY #102
ST. AUGUSTINE, FL 32092 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

02/11/2008

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MACKENZIE, JOHN R
Address: 950 BAYSIDE BLUFF ROAD
City-St-Zip: SWITZERLAND, FL 32259

Title: TD () Delete
Name: MACY, PHYLLIS
Address: 964 BAYSIDE BLUFF ROAD
City-St-Zip: SWITZERLAND, FL 32259

Title: VD () Delete
Name: ORTIZ, VINCENT
Address: 1798 BAYSIDE BLVD.
City-St-Zip: JACKSONVILLE, FL 32259

Title: SD () Delete
Name: CARMODY, MIKE
Address: 1734 BAYSIDE BLVD.
City-St-Zip: SWITZERLAND, FL 32259

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ORTIZ, VINCENT
Address: 1798 BAYSIDE BLVD.
City-St-Zip: SWITZERLAND, FL 32259

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

Title: VD (X) Change () Addition
Name: STOUT, REX
Address: 1737 BAYSIDE BLVD.
City-St-Zip: SWITZERLAND, FL 32092

Title: SD (X) Change () Addition
Name: WEISMAN, KAREN
Address: 939 BAYSIDE BLUFF RD.
City-St-Zip: SWITZERLAND, FL 32259

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: CASEY WEBB

Electronic Signature of Signing Officer or Director

RA

02/11/2008

Date