

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35255

FILED  
Apr 06, 2005  
Secretary of State

Entity Name: BAY PINE SHORES, HOME OWNERS ASSOCIATION INC.

**Current Principal Place of Business:**

10 CAROLYN LANE  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

311 PISCES DRIVE  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

PO BOX 2358  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

FEI Number: 59-3606076      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LANE, CAROLYNN  
10 CAROLYN LANE  
SANTA ROSA BEACH, FL 32459      US

**Name and Address of New Registered Agent:**

SMITH, SCOTT  
311 PISCES DRIVE  
SANTA ROSA BEACH, FL 32459      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: SCOTT SMITH

04/06/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SMITH, SCOTT  
Address: 311 PISCES DR.  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: VPD ( ) Delete  
Name: CARROLL, JOSETTE  
Address: 72 CAROLYNN LANE  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: SD ( ) Delete  
Name: LANE, CAROLYN  
Address: 10 CAROLYNN LANE  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: TD ( ) Delete  
Name: LOPEZ, ROBERT  
Address: 95 CAROLYNN LANE  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: ASD ( ) Delete  
Name: CARNES, RICHARD  
Address: 151 WELTON GULF VIEW DR  
City-St-Zip: PANAMA CITY BEACH, FL 32413

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VPD (X) Change ( ) Addition  
Name: BUDUCEA, VIORICA  
Address: 24 CESSNA STREET  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: SD (X) Change ( ) Addition  
Name: BEARD, VICKY  
Address: 223 PISCES DRIVE  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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

Title: ASD (X) Change ( ) Addition  
Name: CARNES, RICHARD  
Address: 402 WOOD TRAIL  
City-St-Zip: PANAMA CITY, FL 32405

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SCOTT SMITH

PD

04/06/2005

Electronic Signature of Signing Officer or Director

Date