

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

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90298 046 ****61.25



DOCUMENT # N49040
 1. Entity Name
BRIGHTON AT BAY COLONY CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 8231 BAY COLONY DR #3000 NAPLES FL 33963 US	Mailing Address 8231 BAY COLONY DR #3000 NAPLES FL 34108 US
---	---



2. Principal Place of Business <i>8231 Bay Colony Dr</i>	3. Mailing Address
Suite, Apt. #, etc. <i># 3000</i>	Suite, Apt. #, etc.

City & State <i>Naples FL</i>	City & State	4. FEI Number 65-0421399	Applied For Not Applicable
Zip <i>34108</i>	Country <i>US</i>	Zip	Country

1st MOORE CR2E037 (10/04)

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BECKER & POLIAKOFF, P.A.
 BANK OF AMERICA CENTER
 4501 TAMiami TRAIL N., SUITE 214
 NAPLES FL 34103-0000**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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 _____ (NOTE: Registered Agent signature required when reinstating)

Signature, typed or printed name of registered agent and title if applicable DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KAEMMER, ECKLAND <input checked="" type="checkbox"/> Delete 8231 BAY COLONY DRIVE #1903 NAPLES FL 34108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD TARDIO, KATHERINE <input type="checkbox"/> Delete 8231 BAY COLONY DR NAPLES FL 34108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATHONI, GUENTER <input type="checkbox"/> Delete 8231 BAY COLONY DRIVE #1404 NAPLES FL 34108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MASSEY, DWIGHT <input type="checkbox"/> Delete 8231 BAY COLONY DRIVE #1403 NAPLES FL 34108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAEMMER, ECKHARD <input type="checkbox"/> Delete 8231 BAY COLONY DR NAPLES FL 34108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Mr. Robert McDonald <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 8231 Bay Colony Drive Naples, FL 34108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SO Mr Eckhard Kaemmer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8231 Bay Colony Drive Naples, FL 34108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: *Robert McDonald*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____