

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 17, 2009  
Secretary of State

DOCUMENT# N94000002397

Entity Name: BAY OAKS HOA, INC.

**Current Principal Place of Business:**

614 PINE RANCH E. RD  
OSPREY, FL 34229 US

**New Principal Place of Business:**

**Current Mailing Address:**

2477 STICKNEY POINT RD  
SUITE 118 A  
SARASOTA, FL 34231 US

**New Mailing Address:**

FEI Number: 65-0511622      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ARGUS PREP MANAGEMENT  
2477 STICKNEY POINT RD  
SUITE 118A  
SARASOTA, FL 34239 US

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

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:**

Title: D ( ) Delete  
Name: COLE, JEFFREY  
Address: 547 PINE RANCH E. RD.  
City-St-Zip: OSPREY, FL 34229

Title: D ( ) Delete  
Name: BOYLE, JOHN  
Address: 590 OAK RIVER COURT  
City-St-Zip: OSPREY, FL 34229

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

Title: P (X) Change ( ) Addition  
Name: BOYLE, JOHN  
Address: 590 OAK RIVER COURT  
City-St-Zip: OSPREY, FL 34229

Title: VP ( ) Change (X) Addition  
Name: SWEENEY, BRIAN  
Address: 594 PINE RANCH EAST RD  
City-St-Zip: OSPREY, FL 34229

Title: S&T ( ) Change (X) Addition  
Name: GIBBS, MARY  
Address: 502 PINE RANCH EAST RD  
City-St-Zip: OSPREY, FL 34229

Title: D ( ) Change (X) Addition  
Name: COOPER, JERRY  
Address: 506 PINE RANCH EAST RD  
City-St-Zip: OSPREY, FL 34229

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: JOHN BOYLE

P

04/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date