

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2008 8:00 am
Secretary of State

03-03-2008 90197 029 ****61.25

DOCUMENT # N94000006252
1. Entity Name
BAY HARBOR COMMUNITY ASSOCIATION, INC.



Principal Place of Business
8910 TERRENE CT STE 200
BONITA SPRINGS, FL 34135-5679 US

Mailing Address
8910 TERRENE CT STE 200
BONITA SPRINGS, FL 34135-5679 US

%Gulf Breeze Mgmt. Svcs. of / %Gulf Breeze Mgmt. Svcs. of

2. Principal Place of Business No P.O. Box #
SW FL, LLC

3. Mailing Address
SW FL, LLC

400000



Suite, Apt. #, etc.

01022008 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number
65-0572124

Applied For
Not Applicable

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WEIDNER, RALPH L
8910 TERRENE CT STE 200
GULF BREEZE MGMT LLC
BONITA SPRINGS, FL 34135-5679

Name
Street Address (P.O. Box Number is Not Acceptable)
%Gulf Breeze Mgmt. Svcs. of SW FL, LLC
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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D Delete
NAME FARINA, GEARALD
STREET ADDRESS 27164 SHELL RIDGE CIR
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE D Change Addition
NAME Rettew, Bonnie
STREET ADDRESS 4511 Shell Ridge Court
CITY-ST-ZIP Bonita Springs, FL 34134

TITLE PD Delete
NAME QUINBY, NELSON
STREET ADDRESS 27170 SHELL RIDGE CIRCLE
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD Delete
NAME WARRINGTON, STUART
STREET ADDRESS 27128 SHELL RIDGE CIRCLE
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D Delete
NAME WEIR, CLAUDE
STREET ADDRESS 27056 SHELL RIDGE CIR
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D Delete
NAME DALTON, WILLIAM
STREET ADDRESS 4501 SHELL RIDGE CT
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE V/D Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 another like empowered.

SIGNATURE: Nelson Quinby
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/08 (239) 390-0596
Date Daytime Phone #

vb