

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002589

FILED
Jan 16, 2007
Secretary of State

Entity Name: BAY & BEACH CLUB ASSOCIATION, INC.

Current Principal Place of Business:

19508 GULF BLVD
SUITE 103
INDIAN SHORES, FL 33785

New Principal Place of Business:

Current Mailing Address:

19508 GULF BLVD
SUITE 103
INDIAN SHORES, FL 33785

New Mailing Address:

FEI Number: 59-3510408

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BILL, DENNIS
19508 GULF BLVD
SUITE 103
INDIAN SHORES, FL 33785 US

Name and Address of New Registered Agent:

CHRISTIE S. JONES, PA
2964 KENILWICK DRIVE SOUT
CLEARWATER, FL 337613316 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: CHRISTIE S. JONES

01/16/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROBERTSON, HAROLD
Address: 18508 GULF BLVD
City-St-Zip: INDIAN SHORES, FL 33785

Title: PD () Delete
Name: DENNIS, BILL
Address: 19508 GULF BLVD
City-St-Zip: INDIAN SHORES, FL 33785

Title: AS () Delete
Name: ADAMS, THOMAS D
Address: 19508 GULF BLVD
City-St-Zip: INDIAN SHORES, FL 33788

Title: D () Delete
Name: HERSEY, PAUL D
Address: 19508 GULF BLVD
City-St-Zip: INDIAN SHORES, FL 33785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROBERTSON, HAROLD
Address: 18508 GULF BLVD
City-St-Zip: INDIAN SHORES, FL 33785

Title: D (X) Change () Addition
Name: COOPER, PRISCILLA
Address: 171 - 114TH TERRACE NE
City-St-Zip: ST PETE, FL 33716

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

Title: STD (X) Change () Addition
Name: HERSEY, PAUL D
Address: 19508 GULF BLVD
City-St-Zip: INDIAN SHORES, FL 33785

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS D. ADAMS

AS

01/16/2007

Electronic Signature of Signing Officer or Director

Date