FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # 751692

(5)

BAYWOOD ASSOCIATION, INC.

DATITO	OD HOOODIKHON IIIO.		<u></u>		
Principal Place	of Business	Mailing Address		A TANKINI KANDA DIZAN KINDIN DIJIN DAKA	1481 A1811 B1811 B1811 A1811 A1811 E1A11 1981
596 BAYWOOI DUNEDIN FL		596 BAYWOOD DR NO DUNEDIN FL 34698	o		
US		US		3. Date Incorporated or Qualified 03/25/1980	3a. Date of Last Report 04/20/1995
2. Principal Pla	ice of Business	2a. Mailing Address		4. FEI Number 59-1728809	Applied For Not Applicable
21		Suite, Apt. #, etc.			\$8.75 Additional
Suite, Apt. #	ŧ, etc.	27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	This corporation has liability for in Florida Statutes	itangible tax under s. 199.032, Yes No
24	9. Name and Address of Curren	29 Agent	30	10. Name and Address of New Re	
	9. Hame and Address of Carre		81 Name		
VANDED	IN PADRADA		82 Street Ac	Idress (P.O. Box Number is Not Acceptable	e)
	VANDERLICK, BARBARA 603 BAYWOOD DR. SOUTH				
	N FL 34698		83		
00,100.			84 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 617.0502	? and 617.1508, Florida Statu ida. Such change was author	ites, the above named corp ized by the corporation's bi	ocration submits this statement for the purpoard of directors. I hereby accept the appo	intment as registered agent. I am
familiar wit	th, and accept the obligations of Sect	tion 617.0503, Florida Statute			2/22/01
SIGNATURE	Stringture, typed or printed name of registered agent	prdelle	NOTE: Registered Agent signature req	usuusukk	DATE
12.	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFE	
TITLE	P	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	Boyers, Denver		1.2 NAME		
STREET ADDRESS	534 BAYWOOD DR S		1.3 STREET ADDRESS		
CITY-ST-ZIP	DUNEDIN FL		1.4 CITY - ST - ZIP	<u> </u>	Change Addition
TITLE	VP	⊠ DELETE	L .	VP ROBERT O'CONNE	
NAME	-LESLIE, DAVID		2 2 NAME	2456 BAYWOOD	DR. WEST
STREET ADDRESS	2485 CORONADO WAY			DUNEDIN FL	241098
CITY-ST-ZIP	DUNEDIN FL	DELETE	2 4 CITY-ST-ZIP 3.1 TITLE	DO NE DIO FD	Change Addition
TITLE	TD DARBARA		3.2 NAME		
NAME STREET ADDRESS	VANDERLICK, BARBARA 603 BAYWOOD DR. SOUTH		3.3 STREET ADDRESS		
DITY-ST-ZIP	DUNEDIN FL		3.4. CITY-ST-ZIP		
TITLE	S	™ DELETE	4.1 TITLE	SECRETARY	Change Addition
NAME	FEDORA, RICHARD		4. 2 NAME	BARBI CRONE 1435 BAYWOOD	DO SAST
STREET ADDRESS	532 BAYWOOD DR: NORTH		4.3 STREET ADORESS	2435 BAYWOOD	DIC 1 CMS 1
CITY-ST-ZIP	DUNEDIN FL	47	4.4 CITY - ST - ZIP	DUNEDIN FL	34698 ☐ Addition
TITLE	D	DELETE	5.1 TITLE	DIRECTOR WILLIAM MUE	Diguige 1 1.05man
NAME	O'CONNELL, ROBERT			2436 BAYWOOT	TO FAST
STREET ADDRESS	2456 BAYWOOD DR. W.		5.3 STREET ADDRESS	DUNEDIN, FL	341.98
CITY-ST-ZIP	DUNEDIN, FL 00000	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE	DUNEDIN, FL	Change Addition
TITLE	D MODADDÓN MEMIN	Morreit	6.2 NAME		
NAME OTREET ADDRESS	MCBARRON, KEVIN		6.3 STREET ADDRESS		
STREET ADDRESS	539 BAYWOOD DR S DUNEDIN FL		64 CITY - \$1 - 7IP		
14. Ldo here		d with this filing is voluntarily f	la l	lify for the exemption stated in Section 119	.07(3)(k), Florida Statutes. I further
certify that	at the information indicated on this and t I am an officer or director of the corp in Block 12 or Block 13 if changed, or	nual report or supplemental a noration or the receiver or trus	stee empowered to execute	curate and that my signature shall have the ethis report as required by Chapter 617, F	lorida Statutes; and that my name

3/22/96 (813)736.010