

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 751692

1. Entity Name

BAYWOOD ASSOCIATION, INC.

FILED

00 SEP 26 AM 11:06

Principal Place of Business

Mailing Address

596 BAYWOOD DR NO  
DUNEDIN FL 34698  
US

568 BAYWOOD DR N  
DUNEDIN FL 34698  
US

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1728809

Applied For

Not Applicable

Zip

Country

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

HUNT, TIMOTHY  
568 BAYWOOD DR N  
DUNEDIN FL 34698

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.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing  
Trust Fund Contribution.

☒ \$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Delete  
NAME GIL FREEMAN  
STREET ADDRESS 2450 BAYWOOD DR W  
CITY-ST-ZIP DUNEDIN FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME O'CONNELL, ROBERT  
STREET ADDRESS 2456 BAYWOOD DRIVE WEST  
CITY-ST-ZIP DUNEDIN FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☐ Delete  
NAME HUNT, CHRISTINE R  
STREET ADDRESS 568 BAYWOOD DR N  
CITY-ST-ZIP DUNEDIN FL 34698

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD ☐ Delete  
NAME HUNT, TIM  
STREET ADDRESS 568 BAYWOOD DR N  
CITY-ST-ZIP DUNEDIN FL 34698

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME CAMERON, MARK  
STREET ADDRESS 2472 TRADE WINDS DR  
CITY-ST-ZIP DUNEDIN FL 34698

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME BOYER, DENVER  
STREET ADDRESS 534 BAYWOOD DR S  
CITY-ST-ZIP DUNEDIN FL 34698

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Timothy L. Hunt 9/13/00 727-734-0026

Date

Daytime Phone #

CR2E037 (5/00)

001142