

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 04, 2007
Secretary of State**

DOCUMENT# N93000001242

Entity Name: BAY RIDGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
STE. 5000
LONGWOOD, FL 327795044 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
STE. 5000
LONGWOOD, FL 327795044 US

New Mailing Address:

FEI Number: 59-3168677 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR.
SENTRY MANAGEMENT INC.
2180 WEST SR 434, STE. 5000
LONGWOOD, FL 32779 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: CHERMAK, HERMAN
Address: 8411 FOXWORTH CIR
City-St-Zip: ORLANDO, FL 32819

Title: VPD () Delete
Name: CAPLAN, AMY
Address: 7138 FOXWORTH CT
City-St-Zip: ORLANDO, FL 32819

Title: PD () Delete
Name: KROL, MARK
Address: 8333 FOXWORTH CIR
City-St-Zip: ORLANDO, FL 32819

Title: STD () Delete
Name: ROGELL, FRANCES
Address: 3611 NW 24TH BLVD BLDG 9-112
City-St-Zip: GAINESVILLE, FL 32605

Title: D () Delete
Name: MEYER, JEANNE
Address: 7006 SOMERTON BLVD
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: CHERMAK, HERMAN
Address: 8411 FOXWORTH CIR
City-St-Zip: ORLANDO, FL 32819

Title: D (X) Change () Addition
Name: CAPLAN, AMY
Address: 7138 FOXWORTH CT
City-St-Zip: ORLANDO, FL 32819

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

Title: D (X) Change () Addition
Name: KOCAB, TOM
Address: 7048 SOMERTON BLVD
City-St-Zip: ORLANDO, FL 32819

Title: STD (X) Change () Addition
Name: MEYER, JEANNE
Address: 7006 SOMERTON BLVD
City-St-Zip: ORLANDO, FL 32819

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: MARK KROL

PD

04/04/2007

Electronic Signature of Signing Officer or Director

Date