

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2008 8:00 am
Secretary of State

05-14-2008 90010 026 ****70.00

DOCUMENT # N18555

1. Entity Name
BAY INDIES HOME OWNERS ASSOCIATION, INC.



Principal Place of Business
**978 QUESTA AVENUE EAST
VENICE, FL 34285 US**

Mailing Address
**978 QUESTA AVENUE EAST
VENICE, FL 34285 US**

40101775



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02212008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-2498330

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

**BAMONTE, JONATHAN J.
BECKER & POLIAKOFF, P.A.
2401 W BAY DR STE 414 311 Park Place Blvd, Suite 250
LARGO, FL 33770-1041 Clearwater, FL 33759**

Name
Becker + Poliakoff, P.A.

Street Address (P.O. Box Number is Not Acceptable)

**311 Park Place Blvd, Suite 250
City Clearwater FL Zip Code 33759**

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, the registered agent.

SIGNATURE

Signature, print the person name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

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

TITLE	P	☐ Delete
NAME	PINZONE, ANTHONY V	
STREET ADDRESS	978 QUESTA AVE E	
CITY-STATE-ZIP	VENICE, FL 34285	
TITLE	D	☐ Delete
NAME	LANDAU, MERLE	
STREET ADDRESS	916 ZACAPA AVE	
CITY-STATE-ZIP	VENICE, FL 34285	
TITLE	S	☐ Delete
NAME	SASS, JOAN	
STREET ADDRESS	921 QUESTA AVE. W.	
CITY-STATE-ZIP	VENICE, FL 34285	
TITLE	D	☒ Delete
NAME	FLOYD, JOSEPH	
STREET ADDRESS	911 POSADAS AVE W	
CITY-STATE-ZIP	VENICE, FL 34285	
TITLE	T	☐ Delete
NAME	FLOYD, JOSEPH	
STREET ADDRESS	911 POSADAS AVE. W.	
CITY-STATE-ZIP	VENICE, FL 34285	
TITLE	2VP	☐ Delete
NAME	CURRAN, HENRY	
STREET ADDRESS	1249 N INDIES CIR	
CITY-STATE-ZIP	VENICE, FL 34285	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	1st VP	☒ Change ☐ Addition
NAME	William Butts	
STREET ADDRESS	930 Inagua Avenue West	
CITY-STATE-ZIP	Venice, Florida 34285	
TITLE	Director	☒ Change ☐ Addition
NAME	Richard Welch	
STREET ADDRESS	957 Cayman Avenue East	
CITY-STATE-ZIP	Venice, Florida 34285	
TITLE	Director	☐ Change ☒ Addition
NAME	Sharon Michel	
STREET ADDRESS	945 Kenoma Avenue East	
CITY-STATE-ZIP	Venice, Florida 34285	
TITLE	Director	☐ Change ☒ Addition
NAME	Anthony Tremonto	
STREET ADDRESS	956 Roseau Avenue East	
CITY-STATE-ZIP	Venice, Florida 34285	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-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 all other like empowered.

SIGNATURE:

Anthony V. Pinzone, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Anthony V. Pinzone

2-21-08

941-486-0003

DATE

PHONE NUMBER