

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 728931

**Entity Name:** LAURELWOOD CONDOMINIUM I ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O BAY MANAGEMENT INC  
2445 TAMPA ROAD SUITE B  
PALM HARBOR, FL 34683

**Current Mailing Address:**

C/O BAY MANAGEMENT INC  
2445 TAMPA ROAD SUITE B  
PALM HARBOR, FL 34683 US

**FEI Number:** 59-1573950

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BAY MANAGEMENT, INC.  
2445 TAMPA ROAD  
SUITE B  
PALM HARBOR, FL 34683 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            COOPER, ANTIONETTE  
Address        2444 E LAURELWOOD DRIVE  
City-State-Zip: CLEARWATER FL 33763

Title            SECRETARY  
Name            CORLITO, JOHN  
Address        2452 D LAURELWOOD DRIVE  
City-State-Zip: CLEARWATER FL 33763

Title            VP  
Name            MCDERMOTT, CHRISTINE  
Address        2452 B LAURELWOOD DRIVE  
City-State-Zip: CLEARWATER FL 33763

Title            D  
Name            ARNER, THOMAS  
Address        2468B LAURELWOOD DRIVE  
City-State-Zip: CLEARWATER FL 33763

Title            TREASURER  
Name            REAGAN, DENNIS  
Address        2476 C LAURELWOOD DRIVE  
City-State-Zip: CLEARWATER FL 33763

*I hereby 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 all other like empowered.*

**SIGNATURE:** ANTIONETTE COOPER

**PRESIDENT**

**03/27/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date