

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735669

Entity Name: BAY ISLES HARBOR ASSOCIATION, INC.**Current Principal Place of Business:**2262 GULF GATE DRIVE
SARASOTA, FL 34231**Current Mailing Address:**2262 GULF GATE DRIVE
SARASOTA, FL 34231**FEI Number:** 59-1685117**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BAIERLEIN, RICHARD
1560 HARBOR CAY LANE
LONGBOAT KEY, FL 34228 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	PD
Name	BAIERLEIN, RICHARD
Address	1560 HARBOR CAY LANE
City-State-Zip:	LONGBOAT KEY FL 34228

Title	D
Name	CLARKE, TIM
Address	560 HARBOR POINT ROAD
City-State-Zip:	LONGBOAT KEY FL 34228

Title	SD
Name	NOTARI, TERRY
Address	1600 HARBOR CAY LANE
City-State-Zip:	LONGBOAT KEY FL 34228

Title	D
Name	MEYERS, CHRISTINA
Address	531 HARBOR CAY DRIVE
City-State-Zip:	LONGBOAT KEY FL 34228

Title	DIRECTOR
Name	WOLFENDALE, MARK
Address	510 HARBOR COVE CIRCLE
City-State-Zip:	LONGBOAT KEY FL 34228

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: RICHARD BAIERLEIN**PRESIDENT****04/04/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date