

**2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 743456

**Entity Name:** BAY TREE PATIO HOMES CONDOMINIUM ASSOCIATION, INC.

**FILED  
Sep 01, 2020  
Secretary of State  
4278436202CC**

**Current Principal Place of Business:**

7100 W COMMERICAL BLVD.  
LAUDERHILL, FL 33319

**Current Mailing Address:**

7100 WEST COMMERCIAL BLVD  
SUITE 107  
LAUDERHILL, FL 33319

**FEI Number:** 59-2050343

**Certificate of Status Desired:** No

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

AMBASSADOR COMMUNITY MGMT.  
7100 WEST COMMERCIAL BLVD  
SUITE 107  
LAUDERHILL, FL 33319 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            TREASURER  
Name            CORDIERO, LISA  
Address        7100 W. COMMERCIAL BLVD., STE.  
                  107  
City-State-Zip: LAUDERHILL FL 33319

Title            DIRECTOR  
Name            HOLLIS, SHARON  
Address        7100 W. COMMERCIAL BLVD., STE.  
                  107  
City-State-Zip: LAUDERHILL FL 33319

Title            VP  
Name            RAMIREZ, CARLOS  
Address        7100 W COMMERICAL BLVD.  
                  SUITE 107  
City-State-Zip: LAUDERHILL FL 33319

Title            SECRETARY  
Name            WALLACE, GREGORY  
Address        7100 WEST COMMERCIAL BLVD  
                  SUITE 107  
City-State-Zip: LAUDERHILL FL 33319

Title            PRESIDENT  
Name            MAHER, TERESA  
Address        7100 WEST COMMERCIAL BLVD  
                  SUITE 107  
City-State-Zip: LAUDERHILL FL 33319

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:** TERESA E. MAHER

**PRESIDENT**

**09/01/2020**

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

\_\_\_\_\_  
Date