

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751692

Entity Name: BAYWOOD ASSOCIATION, INC.**Current Principal Place of Business:**596 BAYWOOD DR NO
DUNEDIN, FL 34698**Current Mailing Address:**P.O. BOX 636
DUNEDIN, FL 34697-0636 US**FEI Number:** 59-1728809**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**O'CONNELL, BARBARA L
2456 BAYWOOD DR. W.
DUNEDIN, FL 34698 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 PRES
Name JOHNSON, J
Address 577 BAYWOOD DRIVE N
City-State-Zip: DUNEDIN FL 34698

Title VP
Name SAVAGE, JOHN
Address 588 BAYWOOD DR. SOUTH
City-State-Zip: DUNEDIN FL 34698

Title DIRECTOR
Name HARRISON, NANCY
Address 279 TRADEWINDS DR S
City-State-Zip: DUNEDIN FL 34698

Title DIRECTOR
Name HENDERSON, LYNN
Address 551 BAYWOOD DR S
City-State-Zip: DUNEDIN FL 34698

Title D
Name RUSSELL, MARTHA
Address 520 BAYWOOD DR. S.
City-State-Zip: DUNEDIN FL 34698

Title SEC
Name SHELDON, DEBRA
Address 598 BAYWOOD DR. S
City-State-Zip: DUNEDIN FL 34698

Title DIRECTOR
Name HUNT, TIM
Address 568 BAYWOOD DRIVE NORTH
City-State-Zip: DUNEDIN FL 34698

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: JOHNSON

PRESIDENT

04/12/2014

Electronic Signature of Signing Officer/Director Detail_____
Date