

**2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N01227

**Entity Name:** PHILIPPE BAY ASSOCIATION, INC.

**Current Principal Place of Business:**

251 WINDWARD PASSAGE  
SUITE F  
CLEARWATER, FL 33767

**Current Mailing Address:**

251 WINDWARD PASSAGE  
SUITE F  
CLEARWATER, FL 33767 US

**FEI Number: 59-2407896**

**Certificate of Status Desired: No**

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

JIM NOBLES MANAGEMENT, INC.  
251 WINDWARD PASSAGE  
SUITE F  
CLEARWATER, FL 33767 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: SHERON NICHOLS**

**10/20/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	VP	Title	SECRETARY, DIRECTOR
Name	ANTE, WILLIAM	Name	TOPOR, PAULA
Address	7300 PARK STREET	Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777	City-State-Zip:	SEMINOLE FL 33777
Title	TREASURER, DIRECTOR	Title	DIRECTOR
Name	MILLER, ANNETTE	Name	BAYARD, AARON
Address	7300 PARK STREET	Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777	City-State-Zip:	SEMINOLE FL 33777
Title	PRESIDENT		
Name	HALLIGAN, SHARON		
Address	7300 PARK STREET		
City-State-Zip:	SEMINOLE FL 33777		

*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: SHARON HALLIGAN**

**PRESIDENT**

**10/20/2017**

Electronic Signature of Signing Officer/Director Detail

Date