

**2018 FLORIDA NOT FOR PROFIT CORPORATION 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

03/22/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name ANTE, WILLIAM  
Address 317 PARKSIDE LANE  
City-State-Zip: SAFETY HARBOR FL 34695

Title DIRECTOR  
Name BLISS, CHAN  
Address 306 PARKSIDE LANE  
City-State-Zip: SAFETY HARBOR FL 34695

Title PRESIDENT  
Name HALLIGAN, SHARON  
Address 2010 PHILIPPE CT.  
City-State-Zip: SAFETY HARBOR FL 34685

Title SECRETARY, DIRECTOR  
Name TOPOR, PAULA  
Address 2018 PHILIPPE CT.  
City-State-Zip: SAFETY HARBOR FL 34695

Title DIRECTOR  
Name BAYARD, AARON  
Address 77623 MY LANE  
City-State-Zip: HUDSON FL 34667

*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

03/22/2018

Electronic Signature of Signing Officer/Director Detail

Date