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. 02/21/2015 SIGNATURE: LYNNE SIEGFRIED VICE

Electronic Signature of Signing Officer/Director Detail

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0300005085

Entity Name: BAYSIDE ESTATES OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

644 FLORIDA AVE UNIT D PANAMA CITY, FL 32401

Current Mailing Address:

PO BOX 1306 PANAMA CITY, FL 32402

FEI Number: 20-0565737

Name and Address of Current Registered Agent:

SIEGFRIED, LYNNE **BAYSIDE ESTATES** 644 FLORIDA AVE UNIT D PANAMA CITY, FL 32401 US

SIGNATURE: LYNNE SIEGFRIED 02/21/2015 Electronic Signature of Registered Agent

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.

Officer/Director Detail :

Title	PRESIDENT	Title VICE	PRESIDENT/TREASURER
Name	ROEMER, LINDA	Name SIEGI	FRIED, LYNNE
Address	305 ORCHARD LANE #6		IDE ESTATES
City-State-Zip:	e-Zip: SEDONA AZ 86336	644 F	LORIDA AVE UNIT D
	e-zip. SEDONA AZ 80330	City-State-Zip: PANA	MA CITY FL 32401
Title	SECRETARY		
Name	POWELL, GRANT DR.		
Address	644 FLORIDA AVE UNIT G		
City-Stat	e-Zip: PANAMA CITY FL 32401		
	1		

Certificate of Status Desired: Yes

CC5244360452

Date

FILED Feb 21, 2015

Secretary of State

PRESIDENT/TREASURER