

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000006091

**Entity Name:** BAY STREET VILLAGE & TOWNCENTER LAND CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jan 12, 2018**  
**Secretary of State**  
**CC4607637335**

**Current Principal Place of Business:**

MICHAEL SAUNDERS & CO ATTN BOB SMITH  
1801 MAIN ST  
SARASOTA, FL 34236

**Current Mailing Address:**

MICHAEL SAUNDERS & CO ATTN BOB SMITH  
1801 MAIN STREET  
SARASOTA, FL 34236 US

**FEI Number: 80-0210782**

**Certificate of Status Desired: No**

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

MICHAEL SAUNDERS & CO COMMERCIAL PROPERTY MGMT  
MICHAEL SAUNDERS & CO ATTN BOB SMITH  
1801 MAIN STREET  
SARASOTA, FL 34236 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:** BOB SMITH, DIRECTOR MSC COMMERCIAL PROP MGMT 01/12/2018  
Electronic Signature of Registered Agent Date

**Officer/Director Detail :**

Title PD  
Name MOORE, RANDY  
Address MICHAEL SAUNDERS & CO ATTN BOB SMITH  
1801 MAIN STREET  
City-State-Zip: SARASOTA FL 34236

Title VPSD  
Name DOUGAN, MARTY  
Address MICHAEL SAUNDERS & CO ATTN BOB SMITH  
1801 MAIN STREET  
City-State-Zip: SARASOTA FL 34236

Title TD  
Name SMITH, ROBERT  
Address MICHAEL SAUNDERS & CO ATTN BOB SMITH  
1801 MAIN STREET  
City-State-Zip: SARASOTA FL 34236

*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:** ROBERT SMITH TD 01/12/2018  
Electronic Signature of Signing Officer/Director Detail Date