

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10480

**Entity Name:** BAYSHORE PLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

7709 GIBSONTON DRIVE  
GIBSONTON, FL 33534

**FILED**  
**Mar 19, 2024**  
**Secretary of State**  
**9666074458CC**

**Current Mailing Address:**

P.O BOX 2878  
RIVERVIEW, FL 33568 US

**FEI Number: 59-2753184**

**Certificate of Status Desired: No**

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

UNIGUE PROPERTY SERVICE, INC  
7709 GIBSONTON DRIVE  
GIBSONTON, FL 33534 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            PRESIDENT  
Name            BELL, DANIEL  
Address        2314 S. CLEWIS CT. #105  
City-State-Zip: TAMPA FL 33629

Title            MANAGER  
Name            NORTON, FONDA  
Address        P.O BOX 2878  
City-State-Zip: RIVERVIEW FL 33568

Title            TREASURER  
Name            ROBERSON, ERIC  
Address        2314 S CLEWIS CT.  
                  #205  
City-State-Zip: TAMPA FL 33629

Title            SECRETARY, DIRECTOR  
Name            WILLIAMS, SHAUN  
Address        2314 S. CLEWIS CT.  
                  #104  
City-State-Zip: TAMPA FL 33629

Title            DIRECTOR  
Name            SPIKER, CHRISTINE  
Address        2312 S CLEWIS CT.  
                  201  
City-State-Zip: TAMPA FL 33629

Title            DIRECTOR  
Name            LUBINSKY, BRITNEY  
Address        P.O BOX 2878  
City-State-Zip: RIVERVIEW FL 33568

*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: FONDA NORTON**

**MANAGER**

**03/19/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date