## **2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N44624

Entity Name: BAYSIDE OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:** 

600 GRAND BLVD SUITE 208 MIRAMAR BEACH, FL 32550

**Current Mailing Address:** 

600 GRAND BLVD SUITE 208 MIRAMAR BEACH. FL 32550 US

FEI Number: 59-3131017 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A. 348 MIRACLE STRIP PKWY, SW, STE 7 FORT WALTON BEACH, FL 32548 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

FILED Feb 08, 2022

**Secretary of State** 

1752617055CC

Officer/Director Detail:

Title PD Title VPD

NameSTROBURG, SHARONNameMILLERD, ROBINAddress35 HIBISCUS LANEAddress104 ANTILLES COVE

City-State-Zip: MIRAMAR BEACH FL 32550 City-State-Zip: MIRAMAR BEACH FL 32550

Title SD Title TD

Name DEPIETRO, MIHAELA Name ANDERSON, MICHAEL

Address 8 BOUGANVILLA Address 71 BAYSIDE PARK

City-State-Zip: MIRAMAR BEACH FL 32550 City-State-Zip: MIRAMAR BEACH FL 32550

Title D Title [

NameOBERLIN, FARANameWASIK, BRIANAddress320 HIDEAWAY BAYAddress15 BONAIRE BLVD.

City-State-Zip: MIRAMAR BEACH FL 32550 City-State-Zip: MIRAMAR BEACH FL 32550

Title D

Name CONLEY, CYNDI
Address 12 HERON POINT

City-State-Zip: MIRAMAR BEACH FL 32550

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 STROBURG PRESIDENT 02/08/2022

Electronic Signature of Signing Officer/Director Detail

Date