

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 12, 2015
Secretary of State
CC7573770763

Entity Name: BAY HARBOR COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

%GULF BREEZE MGMT. SVCS., INC.
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135

Current Mailing Address:

%GULF BREEZE MGMT. SVCS., INC.
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135 US

FEI Number: 65-0573124

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEIDNER, RALPH L
%GULF BREEZE MGMT. SVCS., INC.
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135 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 PD
Name ARMSTRONG, ROBERT
Address 8910 TERRENE COURT, SUITE 200
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name MORGAN, GEORGE
Address 8910 TERRENE COURT, SUITE 200
City-State-Zip: BONITA SPRINGS FL 34135

Title 1STVD
Name BORUSIEWICH, NICHOLAS
Address 8910 TERRENE COURT, SUITE 200
City-State-Zip: BONITA SPRINGS FL 34135

Title 2NDVD
Name COLWELL, DEAN
Address 8910 TERRENE COURT, SUITE 200
City-State-Zip: BONITA SPRINGS FL 34135

Title STD
Name KNUTH, ROBERT
Address 8910 TERRENE COURT, #200
City-State-Zip: BONITA SPRINGS FL 34135

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 ARMSTRONG

PRESIDENT

02/12/2015

Electronic Signature of Signing Officer/Director Detail Date