

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702223

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** BAYWOOD VILLAGE ASSOCIATION, INC.

**Current Principal Place of Business:**

309 WESTWINDS  
PALM HARBOR, FL 34683 US

**New Principal Place of Business:**

**Current Mailing Address:**

309 WESTWINDS  
PALM HARBOR, FL 34683 US

**New Mailing Address:**

**FEI Number:** 59-1914475      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

DEVRIES, NORMAN  
52 GULFWINDS DR W  
PALM HARBOR, FL 34683 US

**Name and Address of New 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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: DEVRIES, NORMAN  
Address: 52 GULFWINDS DRW  
City-St-Zip: PALM HARBOR, FL 34683

Title: VP  
Name: KELLEY, JERRY  
Address: 401 DRIFTWOOD DR. E.  
City-St-Zip: PALM HARBOR, FL 34683

Title: T  
Name: HOVSEPIAN, MARIA  
Address: 215 WESTWINDS DRIVE  
City-St-Zip: PALM HARBOR, FL 34683

Title: D  
Name: SCHAEFER, ANN  
Address: 229 WESTWINDS DRIVE  
City-St-Zip: PALM HARBOR, FL 34683

Title: D  
Name: HOVSEPIAN, ED  
Address: 215 WESTWINDS DR.P  
City-St-Zip: PALM HARBOR, FL 34683

Title: S  
Name: BEWLEY, SALLY  
Address: 436 MANOR BLVD.  
City-St-Zip: PALM HARBOR, FL 34683

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: NORMAN DEVRIES

PRES

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date