

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704306

FILED
Apr 29, 2008
Secretary of State

Entity Name: BAY RIDGE TERRACE CIVIC ASSOCIATION, INCORPORATED

Current Principal Place of Business:

11524 59TH TERRACE
SEMINOLE, FL 33772 US

New Principal Place of Business:

Current Mailing Address:

11524 59TH TERRACE
SEMINOLE, FL 33772 US

New Mailing Address:

FEI Number: 59-1035184

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JOHNSTON, SUE
11524 59TH TERRACE
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

KRAMP, ROBERT A
11524 59TH TERRACE
SEMINOLE, FL 33772 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: SUE JOHNSTON

04/29/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KRAMP, ROBERT A
Address: 11524 59TH TERRACE
City-St-Zip: SEMINOLE, FL 33772

Title: VD () Delete
Name: BRYANT, PHIL
Address: 11562 66TH AVE.
City-St-Zip: SEMINOLE, FL 33772

Title: T () Delete
Name: MAIKO, PAUL
Address: 6373 114TH ST NORTH
City-St-Zip: SEMINOLE, FL 33772

Title: D () Delete
Name: MCAFFERY, EDWARD
Address: 11571 64TH AVE
City-St-Zip: SEMINOLE, FL 33772

Title: D () Delete
Name: JIRINIC, RICHARD
Address: 11564 69TH AVE N
City-St-Zip: SEMINOLE, FL 33772

Title: S () Delete
Name: KRAMP, KAREN
Address: 11524-59TH TERR NORTH
City-St-Zip: SEMINOLE, FL 33772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: DARBY, MICHAEL
Address: 11405 59TH TERRACE
City-St-Zip: SEMINOLE, FL 33772

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PHIL BRYANT

VD

04/29/2008

Electronic Signature of Signing Officer or Director

Date