2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2012
Secretary of State

DOCUMENT# 705784

Entity Name: BAY AREA APARTMENT ASSOCIATION, INC.

Current Principal Place of Business:

6107 B MEMORIAL HWY.
TAMPA, FL 33615

New Principal Place of Business:

Current Mailing Address:

6107 B MEMORIAL HWY
TAMPA, FL 33615

New Mailing Address:

6107 B MEMORIAL HWY.
TAMPA, FL 33615

FEI Number: 23-7099614 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCMILLAN, JOHN
5309 E. BUSCH BLVD
TEMPLE TERRACE, FL 33617 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: PPD
Name: TRUESDALE, SUSAN
Address: 4030 W. BOY SCOUT BLVD #800
City-St-Zip: TAMPA, FL 33607

Title: ED
Name: GANG, NENA
Address: 6107 B MEMORIAL HWY
City-St-Zip: TAMPA, FL 33615

Title: D
Name: INGRASSIA, FRANK
Address: 10600 4TH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33716

Title: PPD
Name: ROSENWASSER, MARC
Address: 115 S. LOIS AVENUE #126
City-St-Zip: TAMPA, FL 33609

Title: PPD
Name: GRIFFITHS, ROBERT
Address: POST OFFICE BOX 26162
City-St-Zip: TAMPA, FL 33623

Title: PPD
Name: FREDLUND, CINDY
Address: 5100 W. LEMON ST #209.
City-St-Zip: TAMPA, FL 33609

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: NENA GANG ED 04/30/2012

Electronic Signature of Signing Officer or Director Date