

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710555

FILED
Feb 21, 2010
Secretary of State

Entity Name: BAY PINES ESTATES CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

5175 - 97TH WAY, N.
ST. PETERSBURG, FL 33708

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4004
BAY PINES, FL 33744

New Mailing Address:

FEI Number: 59-2773650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAIR, NANCY
5175 97TH WAY, N.
SAINT PETERSBURG, FL 33708 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: BLAIR, NANCY
Address: 5175 97TH WAY.N.
City-St-Zip: SAINT PETERSBURG, FL 33708 US

Title: V
Name: SANDLEDEN, LINDA
Address: 9875-49TH AVE. N.
City-St-Zip: SAINT PETERSBURG, FL 33708 US

Title: T
Name: WINTERS, JO R
Address: 9799 53 AV NO
City-St-Zip: SAINT PETERSBURG, FL 33708 US

Title: B
Name: BUTLER, MARY
Address: 6252- 99TH WAY N.
City-St-Zip: ST PETERSBURG, FL 33708 US

Title: B
Name: JACK, JOHNSON
Address: 9799 - 53RD AVE., N.
City-St-Zip: SAINT PETERSBURG, FL 33708 US

Title: V
Name: SEEL, MICHAEL
Address: 4972 99 ST NORTH
City-St-Zip: SAINT PETERSBURG, FL 33708 US

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: NANCY BLAIR

P

02/21/2010

Electronic Signature of Signing Officer or Director

Date