

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 716838

**FILED**  
**Apr 09, 2010**  
**Secretary of State**

**Entity Name:** BAY COLONY PROTECTIVE ASSOCIATION, INC.

**Current Principal Place of Business:**

1 NORTH COMPASS DR  
GUARD HOUSE  
FT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

1 NORTH COMPASS DRIVE  
GATEHOUSE  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

**FEI Number:** 59-2064592

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MICHAELSON, SUSAN M  
101 BAY COLONY DRIVE  
FORT LAUDERDALE, FL 33308 US

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

IVERSEN, LINDA  
31 S COMPASS DR  
FORT LAUDERDALE, FL 33308 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: LINDA IVERSEN

04/09/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TREA  
Name: IVERSEN, LINDA  
Address: ONE NORTH COMPASS DR, GUARD HOUSE  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: PRES  
Name: DIBATTISTA, ANDREW  
Address: ONE NORTH COMPASS DR, GUARD HOUSE  
City-St-Zip: FT LAUDERDALE,, FL 33308

Title: SECY  
Name: LEDWIDGE, THOMAS  
Address: ONE NORTH COMPASS DR, GUARD HOUSE  
City-St-Zip: FORT LAUDERDALE, FL 33308

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: LINDA IVERSEN

TREA

04/09/2010

Electronic Signature of Signing Officer or Director

Date