

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718102

FILED  
Mar 31, 2009  
Secretary of State

**Entity Name:** BAYOU CONDOMINIUM APARTMENTS WEST ASSOCIATION, INC.

**Current Principal Place of Business:**

550 RIOMAR DR  
VERO BEACH, FL 32963 US

**New Principal Place of Business:**

**Current Mailing Address:**

2925 CARDINAL DR  
SUITE C  
VERO BEACH, FL 32963 US

**New Mailing Address:**

2925 CARDINAL DR  
SUITE D  
VERO BEACH, FL 32963 US

**FEI Number:** 59-1373113

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BREFFNI MANAGEMENT  
2925 CARDINAL DR  
VERO BEACH, FL 32963 US

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

BREFFNI MANAGEMENT  
2925 CARDINAL DR  
SUITE D  
VERO BEACH, FL 32963 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:

03/31/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BEARD, CARTER  
Address: 40 RENAELAER ROAD  
City-St-Zip: ESSEX FIELDS, NJ 07021

Title: V ( ) Delete  
Name: ECKER, DEBORAH  
Address: 550 RIOMAR DR  
City-St-Zip: VERO BEACH, FL 32963

Title: AS ( ) Delete  
Name: MCENERNY, PATRICIA  
Address: 2925 CARDINAL DR  
City-St-Zip: VERO BEACH, FL 32963

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: V (X) Change ( ) Addition  
Name: ECKER, HOYT  
Address: 550 RIOMAR DR  
City-St-Zip: VERO BEACH, FL 32963

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

Title: VP ( ) Change (X) Addition  
Name: LEPAGE, FRED  
Address: 550 RIOMAR DRIVE #24  
City-St-Zip: VERO BEACH, FL 32963

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: PATRICIA MCENERNEY

AS

03/31/2009

Electronic Signature of Signing Officer or Director

Date