

723178

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

MAY 28 2015  
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COVER LETTER

TO: ~~Amendment Section~~  
Division of Corporations

SUBJECT: THE BAYOU ASSOCIATION, INC.  
Name of Corporation

DOCUMENT NUMBER: 723178

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SAN A GIDUS  
Name of Contact Person

SATO REAL ESTATE  
Firm/Company

519 PINE AVE  
Address

ANNA MARIA FL 34216  
City/State and Zip Code

ANDY.GIDUS@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
~~Amendment Section~~  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
~~Amendment Section~~  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 14, 2015

THE BAYOU ASSOCIATION INC,  
SATO REAL ESTATE  
P.O. BOX 1042  
HOLMES BEACH, FL 34218

SUBJECT: THE BAYOU ASSOCIATION INC,  
Ref. Number: 723178

It has been called to our attention that the above named entity has designated JAN A. GIDUS as Registered Agent with an incorrect registered office.

We are asking you to file a change of registered office address with office to correct the filing error. The registered office must have a Florida street address.

Please complete the enclosed Statement of Registered Office or Registered Agent form. Return the completed form and appropriate fee to my personal and confidential attention. The address is listed below.

This letter is to be considered your 60 day notice that your entity will be subject to administrative dissolution or revocation if this error is not corrected by June 16, 2015.

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Stacy Prather  
Regulatory Specialist III

Letter Number: 215A00007397

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: THE BAYOU ASSOCIATION, INC.
2. The principal office address: 522 PINE AVE ANNA MARIA, FL 34216
3. The mailing address (if different): PO Box 1042 HOLMES BEACH, FL 34218
4. Date of incorporation/qualification: \_\_\_\_\_ Document number: 723128
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

SAN A. GIDUS  
519 PINE AVE PO Box 928  
ANNA MARIA, FL 34216

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

SAN A. GIDUS  
519 PINE AVE  
P.O. Box NOT acceptable  
ANNA MARIA, FL 34216

15 MAY 22 PM 2:50

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Pat Grant  
Signature of an officer or director

Pat Grant President of Board  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

9-17-15  
Signature of Registered Agent

5-19-15  
Date

If signing on behalf of an entity:

SAN A. GIDUS  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*