

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 21, 2005 8:00 am**  
**Secretary of State**

03-21-2005 90070 004 \*\*\*\*61.25

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<b>DOCUMENT # 723556</b> 1. Entity Name <b>BAHA MAR ASSOCIATION, INC.</b>			
Principal Place of Business <b>KEYSTONE PROPERTY MGMT. GROUP</b> <b>1717 20TH STREET; SUITE 102</b> <b>VERO BEACH, FL 32960 US</b>		Mailing Address <b>KEYSTONE PROPERTY MGMT. GROUP</b> <b>1717 20TH STREET; SUITE 102</b> <b>VERO BEACH, FL 32960 US</b>	
2. Principal Place of Business <b>O'HAIRE, KMETZ, NUTTALL</b> Suite, Apt., etc. <b>3111 CARDINAL DRIVE</b> City & State <b>VERO BEACH, FL</b> Zip <b>32963</b> Country <b>USA</b>		3. Mailing Address <b>O'HAIRE, KMETZ, NUTTALL</b> Suite, Apt., etc. <b>3111 CARDINAL DRIVE</b> City & State <b>VERO BEACH, FL</b> Zip <b>32963</b> Country <b>USA</b>	
4. FEI Number <b>59-1456450</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>WILLIAM R. MILLER</b> <b>KEYSTONE PROPERTY MANAGEMENT GROUP INC.</b> <b>1717 20TH SUITE 102</b> <b>VERO BEACH, FL 32960</b>		7. Name and Address of New Registered Agent Name <b>SCOTT A. NUTTALL</b> Street Address (P.O. Box Number is Not Acceptable) <b>O'HAIRE, KMETZ, NUTTALL, FIELD &amp; CO</b> <b>3111 CARDINAL DRIVE</b> City <b>VERO BEACH</b> FL Zip Code <b>32963</b>	
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE <u><i>William R. Miller</i></u> DATE <b>03-09-05</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HOOK, MARY LOU 4150 NORTH A1A, APT. #111 VERO BEACH, FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HOMMELL, ROBERT 4150 NORTH A1A, #102 VERO BEACH, FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S, D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ANDERSON, DOROTHY 4150 NORTH A1A, #106 VERO BEACH, FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T, D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>4150 NORTH A1A, #101</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BONELLI, GLORIA 4150 NORTH A1A, #106 VERO BEACH, FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P, D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u><i>Gloria Bonelli, President</i></u>		Date <b>3/18/05</b> Daytime Phone # <b>772-766-0325</b>	