

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # 726499 1. Corporation Name

BAY TREE, A CONDOMINIUM, SECTION TEN, INC.

Principal Place of Business 30-31 MOREE LOOP WINTER SPRINGS FL 32708

2. Principal Place of Business

Suite, Apt. #, etc.

21

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

PAINE-ANDERSON PROPERTIES P.O. BOX 195771 WINTER SPRINGS FL 32719-5771

26

FILED Apr 16, 1999 8:00 am secretary of State

04-16-1999 90020 015 ****61.25



3. Date Incorporated or Qualifed

05/24/1973

4. FEI Number

22		27			59-1498163		Not	Applicable -	
City & State		City & State			sired \square	\$8.75 A	dditional		
23		28			5. Certifcate of Status Des	Fee Required			
Zip	Country	Zip	Country	,	6. Election Campaign Fina	ancing	\$5.00	May Be	
24	25	29	30		Trust Fund Contribution	-	Added to	Fees	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
_			81	Name					
PAINE-ANDERSON PROPERTIES 620 NIGHTHAWK CIRCLE WINTER SPRINGS FL 32719				82 Street Address (P.O. Box Number is Not Acceptable)					
***************************************			84	City			85 Zip C	ode	
	•	•		'		<u> </u>	_ `		
11. Pursuan	t to the provisions of Sections 617.0909 registered agent, or both, in the State of	and 617 1508 Florida Statute:	s, the abov	e-named con	poration submits this statement	for the purpose of	f changing its i	registered iistered	
office or agent. I:	registered agent, or both, in the State of am familiar with, and accept the obligation	pronoa, ouch change was au ons of, Section 617-0503, Flori-	da Statutes	corporati 3.	on a poard of diffectors, interest	, cooopi no appo		,	
SIGNATURE		Me 1) =				4-19	• - ९ 9		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: (nt signature coquire	ed when reinstating)	DATE	ND DIDECTO	DC IN 12	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES	TO OFFICERS A	Change	Addition	
TITLE	+DS →	☐ DELETE	1.1 TITLE	,	IPD		Change	Audition	
NAME	DENNETT, HELEN		1.2 NAME					,	
STREET ADDRESS			1.3 STREET ADDRESS						
CITY-ST-ZIP	WINTER SPRINGS FL	·	1.4 CITY-S		<u> </u>		TER Change	☐ Addition	
TITLE	-DT	□ DELETE	2.1 TITLE		' 0		Change Change	☐ Addition	
NAME	SIBLEY, ROBERT		2.2 NAME						
STREET ADDRES	30-27 MOREE LOOP		2.3 STREE	TADDRESS					
CITY-ST-ZIP	WINTER SPRINGS, FL 00000			ST-ZIP		 	Change	Addition	
TITLE	DP	DELETE	3.1 TITLE	.5	TU		Change	Addition	
NAME	BACCARO, MICHAEL -		3.2 NAME		Angelon Short 30-37 Moree Loop Winder Springs, Fl				
STREET ADDRES	1 5 5 5 11 11 11 11 11 11 11 11 11 11 11		3.3 STREE	TADDRESS	30-37 /nore	ر در ده			
CITY-ST-ZIP	WINTER SPRINGS, FL 00000		3.4. CITY-		Winter Spr.	NES, FL	Change	☐ Addition	
πιε	₩P	☐ DELETE	4.1 TITLE	I)		← Cuauda	- Mudulton	
NAME	BARNETT, JAMES		4. 2 NAME	1					
STREET ADDRES	1 =		4.3 STREE	T ADDRESS				,	
CITY-ST-ZIP	WINTER SPRINGS, FL 00000			ST-ZIP			Change	Addition	
TITLE	DV-	☐ DELETE	5.1 TITLE 5.2 NAME		D		Chiange		
NAME	ALLEN, JAN			TADORESS					
STREET ADDRES	1 •• • • • • • • • • • • • • • • • • •								
CITY-ST-ZIP	WINTER SPRINGS FL	TEN OF THEOD I E		ST-ZIP	<u> </u>		☐ Change	Addition	
TITLE	D	☐ DELETE	6.1 TITLE				☐ originge		
NAME	FRIEDMAN, MARLEN		6.2 NAME	ľ			,		
STREET ADDRES	s 420 CLUB DR			TADDRESS			,		
CITY ST 7ID	WINTER SPRINGS FI		6.4 CITY-5	ST-ZIP		•			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Applied For