

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2000 8:00 am
Secretary of State

03-14-2000 90073 043 ****61.25

DOCUMENT # 726499

1. Entity Name

BAY TREE, A CONDOMINIUM, SECTION TEN, INC.

Principal Place of Business

Mailing Address

444 W. New England Ave.
 Suite B
 Winter Park, FL 32789

P.O. Box 195595
 Winter Springs, FL.
 32719-5595

2. Principal Place of Business

444 W. New England Ave.

3. Mailing Address

P.O. Box 195595

Suite, Apt. #, etc.

Suite # B

Suite, Apt. #, etc.

City & State

Winter Park, Florida

City & State

Winter Springs, FL.

4. FEI Number

59-1498163

Applied For

Not Applicable

Zip

32789

Country

USA

Zip

32719-5595

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

~~HART, JAMES E JR
 2180 WEST SR 434, SUITE 5000
 LONGWOOD FL 32779-5044~~

7. Name and Address of New Registered Agent

Name Andrea Brackin, Manager

Street Address (P.O. Box Number is Not Acceptable)
c/o Specialty Management Company

444 W. New England Ave. Suite B

City

Winter Park,

FL

Zip Code

32789

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.

SIGNATURE Andrea Brackin, Manager

Signature, typed or printed name of registered agent and title if applicable.

Andrea L. Brackin

(NOTE: Registered Agent signature required when reinstating)

2/25/00

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE	VPD	<input type="checkbox"/> Delete
NAME	DENNETT, HELEN	
STREET ADDRESS	20 MOREE LOOP #18	
CITY-ST-ZIP	WINTER SPRINGS FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	SIBLEY, ROBERT	
STREET ADDRESS	30-27 MOREE LOOP	
CITY-ST-ZIP	WINTER SPRINGS FL	
TITLE	STD	<input type="checkbox"/> Delete
NAME	SHORT, ANGELA	
STREET ADDRESS	30-37 MOREE LOOP	
CITY-ST-ZIP	WINTER SPRINGS FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BARNETT, JAMES	
STREET ADDRESS	20 MOREE LOOP 17	
CITY-ST-ZIP	WINTER SPRINGS FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	ALLEN, JAN	
STREET ADDRESS	30-41 MOREE LOOP	
CITY-ST-ZIP	WINTER SPRINGS FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	FRIEDMAN, MARLEN	
STREET ADDRESS	420 CLUB DR	
CITY-ST-ZIP	WINTER SPRINGS FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Helen Dennett	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Robert E. Sibley	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Don Terry	
STREET ADDRESS	30-37 Moree Loop	
CITY-ST-ZIP	Winter Springs, FL 32708	
TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ronney Jannar	
STREET ADDRESS	30-43 Moree Loop	
CITY-ST-ZIP	Winter Springs, FL, 32708	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Robert E. Sibley

3/9/2000

607-327-6889

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice President

Daytime Phone #

CR2E037 (9/99)