

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728720

FILED
Jan 15, 2008
Secretary of State

Entity Name: BAY MARINER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

19701 GULF BLVD
INDIAN SHORES, FL 33785 US

New Principal Place of Business:

Current Mailing Address:

19701 GULF BLVD
INDIAN SHORES, FL 33785 US

New Mailing Address:

FEI Number: 59-1508471 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCEWEN, BOB
19701 GULF BLVD
PENTHOUSE 1
INDIAN SHORES, FL 33785 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PALOPOLI, CARMINE V.PRES.
Address: 19701 GULF BLVD.
City-St-Zip: INDIAN SHORES, FL 33785

Title: TD () Delete
Name: HANSON, VIOLET TREAS
Address: 19701 GULF BLVD.
City-St-Zip: INDIAN SHORES, FL 33785

Title: SD () Delete
Name: MC EWEN, BOB SECT.
Address: 19701 GULF BLVD.
City-St-Zip: INDIAN SHORES, FL 33785

Title: PTD () Delete
Name: SANDERBECK, JAMES PRES.
Address: 19701 GULF BLVD
City-St-Zip: INDIAN SHORES, FL 33785

Title: D () Delete
Name: EASTON, DONALD DIR.
Address: 19701 GULF BLVD
City-St-Zip: INDIAN SHORES, FL 33785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: WCN

PM

01/15/2008

Electronic Signature of Signing Officer or Director

_____ Date