

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731401

FILED  
Aug 15, 2006  
Secretary of State

**Entity Name:** THE BAYSIDE CLUB ASSOCIATION, INC.

**Current Principal Place of Business:**

736 TROPICAL CIRCLE  
SARASOTA, FL 34242

**New Principal Place of Business:**

**Current Mailing Address:**

736 TROPICAL CIRCLE  
SARASOTA, FL 34242

**New Mailing Address:**

**FEI Number:** 59-2005938      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

LONG, BARBARA  
752 TROPICAL CIR  
SARASOTA, FL 34242      US

**Name and Address of New Registered Agent:**

BECK, DEBRA  
741 TROPICAL CIR  
SARASOTA, FL 34242      US

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: DEBRA BECK

08/15/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: BOREK, TED  
Address: 744 TROPICAL CIR  
City-St-Zip: SARASOTA, FL 34242

Title: D      ( ) Delete  
Name: BUCKNELL, PHILIP  
Address: 757 TROPICAL CIR  
City-St-Zip: SARASOTA, FL 34242

Title: D      ( ) Delete  
Name: ZARFOS, PATTY  
Address: 756 TROPICAL CT  
City-St-Zip: SARASOTA, FL 34242

Title: TD      ( ) Delete  
Name: LONG, BARBARA  
Address: 752 TROPICAL CIR  
City-St-Zip: SARASOTA, FL 34242

**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: D      (X) Change ( ) Addition  
Name: BECK, DEBRA  
Address: 741 TROPICAL CIR  
City-St-Zip: SARASOTA, FL 34242

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBRA BECK

D

08/15/2006

Electronic Signature of Signing Officer or Director

Date