

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731401

FILED
Aug 24, 2007
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:

BECK, DEBRA
741 TROPICAL CIR
SARASOTA, FL 34242 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: 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: D () Delete
Name: BECK, DEBRA
Address: 741 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: () 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: DEBRA BECK

D

08/24/2007

Electronic Signature of Signing Officer or Director

Date