
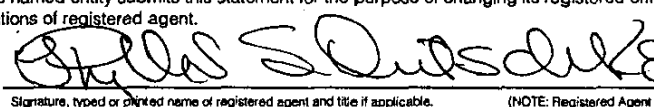


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2007 8:00 am**  
**Secretary of State**

04-18-2007 90185 030 \*\*\*\*61.25

<b>DOCUMENT # 734131</b> 1. Entity Name <b>BAY VILLA PLACE, INC.</b>					
Principal Place of Business <b>121 W WHITING ST 1507 1/2 S. Bay Villa Pl</b> <b>TAMPA, FL 33602 US</b> <b>33629</b>				Mailing Address <b>121 W WHITING ST 1507 1/2 S. Bay Vi</b> <b>TAMPA, FL 33602 US Tampa, FL</b> <b>33629 40001000</b>	
2. Principal Place of Business - No P.O. Box # <b>1507 - 1511 1/2 S. Bay Villa Place</b>		3. Mailing Address Suite, Apt. #, etc.		03282007 Chg-NP CR2E037 (12/06)	
City & State <b>Tampa FL</b>		City & State		4. FEI Number <b>59-1710805</b>	
Zip <b>33629</b>		Country <b>Hillsborough</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>HOWEY, JOHN R.</b> <b>121 W WHITING ST</b> <b>TAMPA, FL 33602</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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. I am familiar with, and accept the obligations of registered agent. <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">           SIGNATURE   <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> </div> <div style="width: 40%; text-align: right;"> <b>4/4/07</b>  <small>DATE</small> </div> </div>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to</b> <b>Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS HOWEY, JOHN 1507 BAY VILLA PLACE TAMPA, FL 00000,	<input checked="" type="checkbox"/> Delete	TITLE Pres. NAME STREET ADDRESS CITY-ST-ZIP	Maria Howey 1507 Bay Villa Place Tampa, FL 33629	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONNEELY, SEAN 1511 1/2 BAY VILLA PL TAMPA, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Director LAVOY, DAVID A 1511 BAY VILLA PLACE TAMPA, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSD Secretary DUTSCHKE, PHYLLIS 1509 BAY VILLA PLACE TAMPA, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary / Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treas. Adrienne Garcia 1507 1/2 S. Bay Villa Place Tampa FL 33629	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Add	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Adrienne Garcia 1507 1/2 S. Bay Villa Place Tampa, FL 33629	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition				

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 