

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734979

FILED
Jan 06, 2009
Secretary of State

Entity Name: BAYSHORE VILLAS ASSOCIATION OF OKALOOSA COUNTY, INC.

Current Principal Place of Business:

1017 EVERGLADE DRIVE
P O BOX 161
NICEVILLE, FL 325887161 US

New Principal Place of Business:

1017 EVERGLADE DRIVE
NICEVILLE, FL 325887161 US

Current Mailing Address:

1017 EVERGLAD DRIVE
P O BOX 161
NICEVILLE, FL 325887161 US

New Mailing Address:

932 LINDEN AVENUE
NICEVILLE, FL 32578 US

FEI Number: 59-2400821

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, HELEN A
932 LINDEN AVE
NICEVILLE, FL 32578 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: AUSTERMANN, ANTHONY E
Address: 1055 EVERGLADE DR.
City-St-Zip: NICEVILLE, FL 32578

Title: SD () Delete
Name: ROBERTS, HELEN
Address: 932 LINDEN AVE.
City-St-Zip: NICEVILLE, FL 32578

Title: T () Delete
Name: ROBERTS, HELEN A
Address: 932 LINDEN AVE
City-St-Zip: NICEVILLE, FL 32578

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:

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: ANTHONY AUSTERMANN

PD

01/06/2009

Electronic Signature of Signing Officer or Director

Date