FILE NOW: FILING FEE IS $61.25

FILED
Apr 07 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **739272** **(3)**

1. Corporation Name

BAY PALMS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O BUXTON PROPERTIES, INC. 147 BELCHER RD. STE 2 LARGO FL 34641 US	C/O BUXTON PROPERTIES, INC. 147 BELCHER RD.STE 2 LARGO FL 33771 US

3. Date Incorporated or Qualified: 06/07/1977
3a. Date of Last Report: 04/19/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 59-1387550 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. **Name and Address of Current Registered Agent**

BUXTON, BRIAN
C/O BUXTON PROPERTIES, INC.
147 BELCHER RD SUITE 2
LARGO FL 34641

10. **Name and Address of New Registered Agent**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Brian P. Buxton 3/24/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	V.P.	☐ Change ☑ Addition
NAME	JAMIESON, DARRELL		1.2 NAME	WEISH, JACK	
STREET ADDRESS	2750 E BAY DR E-11		1.3 STREET ADDRESS	2750 E. BAY DR B-14	
CITY-ST-ZIP	LARGO FL		1.4 CITY-ST-ZIP	LARGO, FL	
TITLE	D	☑ DELETE	2.1 TITLE	D	☐ Change ☑ Addition
NAME	BAKER, BETTY		2.2 NAME	BONJURA, JACK	
STREET ADDRESS	2750 E BAY DR E-12		2.3 STREET ADDRESS	2750 E. BAY DR D-4	
CITY-ST-ZIP	LARGO FL		2.4 CITY-ST-ZIP	LARGO, FL	
TITLE	P	☐ DELETE	3.1 TITLE	D	☐ Change ☑ Addition
NAME	DAWSON, PATRICK		3.2 NAME	HOEHECKE, Robert	
STREET ADDRESS	2750 E BAY DR D-9		3.3 STREET ADDRESS	2750 E. BAY DR C-1	
CITY-ST-ZIP	LARGO FL		3.4 CITY-ST-ZIP	LARGO, FL	
TITLE	ST	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	TRIGGS, MADELEINE		4.2 NAME		
STREET ADDRESS	2750 E BAY DR B-1		4.3 STREET ADDRESS		
CITY-ST-ZIP	LARGO FL		4.4 CITY-ST-ZIP		
TITLE	V	☑ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	MARANDA, ANN		5.2 NAME		
STREET ADDRESS	2750 E BAY DR C-6		5.3 STREET ADDRESS		
CITY-ST-ZIP	LARGO FL		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	MILES, MARY LOU		6.2 NAME		
STREET ADDRESS	2750 E BAY DR F-1		6.3 STREET ADDRESS		
CITY-ST-ZIP	LARGO FL		6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Patrick Dawson, President
PATRICK DAWSON, PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/97 813/536-8135
Date Daytime Phone # 0078939