2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2010
Secretary of State

DOCUMENT# 740475

Entity Name: BAY HARBOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3366 N KEY DR
NORTH FT MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

C/O SILVERCRESTED MANAGEMENT, LLC
P.O. BOX 1848
FORT MYERS, FL 33902 US

New Mailing Address:

FEI Number: 59-1639672 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SILVERCRESTED MANAGEMENT LLC
3436 MARINATOWN LANE
1ST FL UNIT 4
NORTH FORT MYERS, FL 33903 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: SD
Name: WALTER, KATHLEEN
Address: 3354 NORTH KEY DRIVE #F-8
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: D
Name: ADAMS, THEODORE
Address: 3384 NORTH KEY DRIVE A7
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: TD
Name: COULTHARD, MARYANN
Address: 3368 NORTH KEY DRIVE #E-7
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: PD
Name: CREMEANS, STEPHEN
Address: 3392 NORTH KEY DRIVE #B-3
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: VD
Name: ZASTROW, LOIS
Address: 3368 NORTH KEY DRIVE E2
City-St-Zip: NORTH FORT MYERS, FL 33903

I hereby 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 all other like empowered.

SIGNATURE: STEPHEN CREMEANS PD 01/26/2010

Electronic Signature of Signing Officer or Director Date