2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740475

Feb 07, 2012 Secretary of State

Entity Name: BAY HARBOR CONDOMINIUM ASSOCIATION, INC.

New Principal Place of Business: Current Principal Place of Business:

3366 N KEY DR

NORTH FT MYERS, FL 33903

Current Mailing Address: New Mailing Address:

C/O SILVERCRESTED MANAGEMENT, LLC P.O. BOX 1848

FORT MYERS, FL 33902

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SILVERCRESTED MANAGEMENT LLC SILVERCRESTED MANAGEMENT LLC 1490 NE PINE ISLAND ROAD 3436 MARINATOWN LANE 1ST FL UNIT 4 **UNIT 8-D**

NORTH FORT MYERS, FL 33903 US CAPE CORAL, FL 33909 US

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: 02/07/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

WALTER, KATHLEEN Name:

Address: 3354 NORTH KEY DRIVE #F-8 City-St-Zip: NORTH FORT MYERS, FL 33903

Title: PD

Name: SCROGHAM, DAVID Address: PO BOX 594 City-St-Zip: TAFTON, PA 18464

Title:

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

Title:

Name: CONNOLLY, ANDREW 514 SANBORN STREET Address: City-St-Zip: PORT HURON, MI 48060

VD Title:

ZASTROW, LOIS Name:

3368 NORTH KEY DRIVE E2 Address: NORTH FORT MYERS, FL 33903 City-St-Zip:

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: DAVID SCROGHAM PD 02/07/2012