2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# 743025

Entity Name: BAY COURT TOWERS CONDOMINIUM, INC.

Current Principal Place of Business:

899 WEST AVENUE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

899 WEST AVENUE
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 59-1924203 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GONZALEZ, MARIA B
899 WEST AVENUE
APT. 9J
MIAMI BEACH, FL 33139 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:	D	( ) Delete
Name:	MAHONY, JAMES	
Address:	899 WEST AVE #4A	
City-St-Zip:	MIAMI BEACH, FL 33139	
Title:	P	( ) Delete
Name:	PEREZ, PABLO	
Address:	899 WEST AVE #5D	
City-St-Zip:	MIAMI BEACH, FL 33139 US	
Title:	D	( ) Delete
Name:	KEENE, MARK	
Address:	899 WEST AVE., 7D	
City-St-Zip:	MIAMI BEACH, FL 33139	
Title:	S	( ) Delete
Name:	MESA, MARIA A	
Address:	899 WEST AVE #7G	
City-St-Zip:	MIAMI BEACH, FL 33139 US	
Title:	T	( ) Delete
Name:	REYES, SANDRA	
Address:	899 WEST AVE #7G	
City-St-Zip:	MIAMI BEACH, FL 33139	
Title:	D	( ) Delete
Name:	SKANDALIS, THOMAS	
Address:	899 WEST AVE #3F	
City-St-Zip:	MIAMI BEACH, FL 33139 US	

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:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	T	(X) Change ( ) Addition
Name:	REYES, SANDRA	
Address:	899 WEST AVE #5A	
City-St-Zip:	MIAMI BEACH, FL 33139	
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: SANDRA REYES T 04/27/2009

Electronic Signature of Signing Officer or Director — Date