

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744438

FILED
Apr 08, 2005
Secretary of State

Entity Name: BAY ARTS ALLIANCE, INC.

Current Principal Place of Business:

8 HARRISON AVENUE
PO BOX 1153
PANAMA CITY, FL 32402

New Principal Place of Business:

Current Mailing Address:

8 HARRISON AVENUE
PO BOX 1153
PANAMA CITY, FL 32402

New Mailing Address:

FEI Number: 59-1850105

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, JENNIFER N
8 HARRISON AVE
PANAMA CITY, FL 32401 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: PP () Delete
Name: NEUBAUER, MARGARET
Address: 740 S. TYNDALL PKWY
City-St-Zip: PANAMA CITY, FL 32404

Title: PE () Delete
Name: PARISH, RICHARD
Address: 1000 WILDWOOD ROAD
City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: P () Delete
Name: HAAG, BARBARA
Address: 1212 DEWITT ST
City-St-Zip: PANAMA CITY, FL 32401

Title: P () Delete
Name: PELL, ROBERT
Address: 514 MAGNOLIA AVE
City-St-Zip: PANAMA CITY, FL 32401

Title: S () Delete
Name: HARRIMAN, JOAN
Address: 13911 BACK BEACH ROAD
City-St-Zip: PANAMA CITY, FL 32408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CRAWFORD, HOOT
Address: 748 JENKS AVENUE
City-St-Zip: PANAMA CITY, FL 32401

Title: PE (X) Change () Addition
Name: BANNERMAN, CLAIRE
Address: P.O. BOX 611711
City-St-Zip: ROSEMARY BEACH, FL 32461

Title: TREA (X) Change () Addition
Name: CLARK, ROGER
Address: 2304 WINONA DR
City-St-Zip: PANAMA CITY, FL 32405

Title: PP (X) Change () Addition
Name: PELL, ROBERT
Address: 514 MAGNOLIA AVE
City-St-Zip: PANAMA CITY, FL 32401

Title: S (X) Change () Addition
Name: FITE, MAC
Address: P.O. BOX 2467
City-St-Zip: PANAMA CITY, FL 32402

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HOOT CRAWFORD

PRES

04/08/2005

Electronic Signature of Signing Officer or Director

Date