


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90066 020 ****61.25

DOCUMENT # 748061			
1. Entity Name BAYWOOD COLONY SOUTHWOOD APARTMENTS I CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 6146 CLARK CENTER AVE SARASOTA FL 34238 US		Mailing Address 6146 CLARK CENTER AVE STE-A SARASOTA FL 34238 US	
2. Principal Place of Business - No P.O. Box # 2477 Stickney Pt. Rd. Suite, Apt. #, etc. Suite 118 A City & State Sarasota FL		3. Mailing Address SAME Suite, Apt. #, etc. City & State	
Zip 34231	Country US	Zip	Country
6. Name and Address of Current Registered Agent MGMT CONCEPTS OF SARASOTA COUNTY INC 6146 CLARK CENTER AVE SARASOTA FL 34238		7. Name and Address of New Registered Agent Name: Angus Property Management Street Address (P.O. Box Number is Not Acceptable): 2477 Stickney Point Rd. Suite 118 A City: Sarasota FL Zip Code: 34231	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <i>Brandon Hines</i> Brandon Hines - Property Manager 2-9-07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE			
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: D <input type="checkbox"/> Delete	NAME: COSTELLO, FERN STREET ADDRESS: 1711 SOUTHWOOD ST CITY-ST-ZIP: SARASOTA FL 34231	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: TD <input type="checkbox"/> Delete	NAME: FARINELLA, RALPH STREET ADDRESS: 1715 SOUTHWOOD STREET CITY-ST-ZIP: SARASOTA FL 34231	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: VD <input type="checkbox"/> Delete	NAME: SAWYER, PATSY STREET ADDRESS: 1611 SOUTHWOOD ST. CITY-ST-ZIP: SARASOTA FL 34231	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: PD <input type="checkbox"/> Delete	NAME: AUGERI, JOSEPH STREET ADDRESS: 1647 SOUTHWOOD ST. CITY-ST-ZIP: SARASOTA FL 34231	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: SD <input type="checkbox"/> Delete	NAME: WALSER, ELIZABETH STREET ADDRESS: 1601 SOUTHWOOD ST. CITY-ST-ZIP: SARASOTA FL 34231	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: <input type="checkbox"/> Delete		TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Joseph Augeri*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



1st MOORE CR2E037 (10/06)

4. FEI Number 65-0053218 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required