## **-2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## **FILED** Mar 14, 2005 8:00 am Secretary of State 03-14-2005 90104 005 \*\*\*\*61.25

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## **DOCUMENT #750598**

1. Entity Name CONDOMINIUM OWNERS ASSOCIATION OF PINE BAY FOREST, INC.



Principal Place of Business C/O HARMONY MANAGEMENT Mailing Address

C/O HARMONY MANAGEMENT

440 EL CON BRADENTON		440 EL CONQUISTADOR PKWY BRADENTON, FL 34210				 	FIII <b>BB B  X</b>     <b>             </b>	1871 BJB/I B1831 G		ninde an Jarry		
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				01142005	Chg-NP	CR2E	037 (10/03)		
City & State				City & State				4. FEI Number 59-2111	FEI Number Applied For 59-2111138 Not Applicable			
Zip Country						intry	try 5. Certificate o		Status Desired		\$8.75 Ad Fee Require	
Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent						
HARMONY MANAGEMENT, INC 4400 EL CONQUISTAGORE PARKWAY BRADENTON, FL 34282						Name Street Address (P.O. Box Number is Not Acceptable)						
					City		<u> </u>		FI	_ ı		
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  Signature, typed or printed name of registered agent and title if applicable												
					Election Campaign Financing Frust Fund Contribution.			\$5.00 May Be Added to Fees	FI		ck payable t irtment of S	
10.					11.			ADDITIONS/CHAP	VGES TO OFFIC	ERS AND D	IRECTORS IN	J 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	7602 4TH	CONNIE AVE. W TON, FL 34209		☐ Delete		-	i.				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT NIETZAL, 8011 4TH	RICHARD	·:.	Delete	TITLE NAME STRE	:	·				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS OLDEA, E 7913 4TH BRADEN			☐ Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TREUDE, 8013 4TH ANNA MA			☐ Delete				,		-	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	7704 4TH	, DEBRA AVE W TON, FL 34209		☐ Delete		I .					Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	<del></del>		this filing	Delete	CITY-	ET ADDRESS ST-ZIP	d in Se	action 119 07/34i\	Florida Statutes	s Hurther o	Change	Addition

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:

Daytime Phone #