

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753055

FILED  
Mar 10, 2009  
Secretary of State

Entity Name: BAYWOOD CONDOMINIUM ASSOCIATION,INC.

**Current Principal Place of Business:**

4300 BAYWOOD BLVD  
MOUNT DORA, FL 32757

**New Principal Place of Business:**

**Current Mailing Address:**

4300 BAYWOOD BLVD  
MOUNT DORA, FL 32757

**New Mailing Address:**

FEI Number: 59-2006535

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SYKES-AMOS, PATRICIA A  
627 N. DONNELLY STREET  
MT. DORA, FL 32757 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: S ( ) Delete  
Name: GREENHURST, SALLY  
Address: 4360 BAYWOOD BLVD  
City-St-Zip: MOUNT DORA, FL 32757

Title: D ( ) Delete  
Name: ATKINSON, SARAH  
Address: 4300 BAYWOOD BLVD B 101  
City-St-Zip: MOUNT DORA, FL 32757

Title: DT ( ) Delete  
Name: RIVELLI, DONNA  
Address: 4300 BAYWOOD BLVD, #B-204  
City-St-Zip: MOUNT DORA, FL 32757

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: S (X) Change ( ) Addition  
Name: WOODRING, SALLY  
Address: 4300 BAYWOOD BLVD  
City-St-Zip: MOUNT DORA, FL 32757

Title: D (X) Change ( ) Addition  
Name: RUSS, TOM  
Address: 1613 ORANGE AVENUE  
City-St-Zip: TAVARES, FL 32778

Title: P (X) Change ( ) Addition  
Name: RIVELLI, TOM  
Address: 4300 BAYWOOD BLVD, #B-204  
City-St-Zip: MOUNT DORA, FL 32757

Title: T ( ) Change (X) Addition  
Name: BEEBE, MERRELL  
Address: BOX 874  
City-St-Zip: MOUNT DORA, FL 32756

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: MERRELL BEEBE

TREA

03/10/2009

Electronic Signature of Signing Officer or Director

Date