2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#753268

FILED Mar 12, 2005 Secretary of State

Entity Name: BAYVIEW WATERS CONDOMINIUM OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:			siness:	New Prince	New Principal Place of Business:		
	N PARKWAY ON BCH, FL(US				
Current Mailing Address:				New Maili	New Mailing Address:		
	N PARKWAY N ON BCH, FL		US				
FEI Number	r: 59-2052460	FEI No	umber Applied For()	FEI Number Not App	licable () Certificate of Status Desired ()		
Name and	d Address of	Current	Registered Agent:	Name and	Address of New Registered Agent:		
222 ECHC FORT WA The above	R, DEBBIE J O CIRCLE ALTON BEACH e named entity te of Florida.			ourpose of changing i	its registered office or registered agent, or both,		
SIGNATU		nic Sian	ature of Registered Age	ent	Date		
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	V (BARBOUR, FF 726 EGLIN PK FORT WALTO	WY NE U		Title: Name: Address: City-St-Zip:	() Change () Addition		
Fitle: Name: Address: City-St-Zip:	P (STARTUP, WA 726 EGLIN PK FORT WALTO	WY NE U		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	ST (GROSS, DONI 726 EGLIN PK FORT WALTO	(WY NE UI		Title: Name: Address: City-St-Zip:	T (X) Change () Addition ECKERT, LEROY 1 KRISTIAN CIRCLE NICEVILLE, FL 32579		
Title: Name: Address: City-St-Zip:	D (WOODS, SHA 726 EGLIN PK FORT WALTO	WY NE U		Title: Name: Address: City-St-Zip:	ST (X) Change () Addition WOODS, SHARON 726 EGLIN PKWY NE UNIT 5-A FORT WALTON BEACH, FL 32547		
	D (HOLLAND, CIN) Delete		Title: Name:	() Change () Addition		

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: R. WAYNE STARTUP P 03/12/2005