

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753268

FILED
Feb 13, 2007
Secretary of State

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

Current Principal Place of Business:

726 EGLIN PARKWAY NE
FT WALTON BCH, FL 32547 US

New Principal Place of Business:

Current Mailing Address:

726 EGLIN PARKWAY NE
FT WALTON BCH, FL 32547 US

New Mailing Address:

FEI Number: 59-2052460

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOWNER, DEBBIE J
222 ECHO CIRCLE
FORT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

RDF ASSOCIATES, INC.
29C MIRACLE STRIP PARKWAY
FORT WALTON BEACH, FL 32548 US

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: ANDREA MCDERMOTT

02/13/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: WOODS, JIM
Address: 726 EGLIN PKWY NE UNIT 5-A
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: P () Delete
Name: VARKONYI, NIC
Address: 726 EGLIN PKWY NE UNIT 10-B
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: T () Delete
Name: ECKERT, LEROY
Address: 1 KRISTIAN CIRCLE
City-St-Zip: NICEVILLE, FL 32579

Title: ST () Delete
Name: WOODS, SHARON
Address: 726 EGLIN PKWY NE UNIT 5-A
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: D () Delete
Name: ECKERT, RHONDA
Address: 1 KRISTAN CIRCLE
City-St-Zip: NICEVILLE, FL 32579

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: WOODS, JIM
Address: 21 MEIGS DR
City-St-Zip: SHALIMAR, FL 32579

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: WOODS, SHARON
Address: 21 MEIGS DR.
City-St-Zip: SHALIMAR, FL 32579

Title: D (X) Change () Addition
Name: HOLLAND, CINDY
Address: 162 RAINBOW DR.
City-St-Zip: FORT WALTON, FL 32548

I hereby certify that the information supplied with this filing does not qualify for the 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: NIC VARKONYI

P

02/13/2007

Electronic Signature of Signing Officer or Director

Date