


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 01, 2008 8:00 am**  
**Secretary of State**

02-01-2008 90029 003 \*\*\*\*61.25

<b>DOCUMENT # 755997</b> 1. Entity Name <b>EVANTON BAYE TOWNHOMES CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>4746 SOUTH OCEAN BLVD HIGHLAND BCH, FL 33487</b>			Mailing Address <b>4746 SOUTH OCEAN BLVD HIGHLAND BCH, FL 33487</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>59-2063077</b>	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>FANNING, EDWARD 4801 S. OCEAN BLVD HIGHLAND BEACH, FL 33487</b>				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ <b>FL</b> Zip Code _____	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>					
TITLE	VPD <input checked="" type="checkbox"/> Delete				
NAME	MAZZELLA, ANNE J				
STREET ADDRESS	4746 S OCEAN BLVD.				
CITY - ST - ZIP	HIGHLAND BCH, FL 33487				
TITLE	D <input type="checkbox"/> Delete				
NAME	KAY, ROBERT				
STREET ADDRESS	4746 S. OCEAN BLVD				
CITY - ST - ZIP	HIGHLAND BEACH, FL 33487				
TITLE	ST <input type="checkbox"/> Delete				
NAME	BRUNNER, RONALD				
STREET ADDRESS	4746 S OCEAN BLVD				
CITY - ST - ZIP	HIGHLAND BEACH, FL 33487				
TITLE	<input type="checkbox"/> Delete				
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	<input type="checkbox"/> Delete				
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	<input type="checkbox"/> Delete				
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>					
TITLE	Barbara Stone <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
NAME	4746 S. OCEAN BLVD				
STREET ADDRESS	HIGHLAND BEACH, FL 33487				
CITY - ST - ZIP					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
<b>SIGNATURE:</b> <i>Barbara Stone</i> <span style="float: right;">1-30-08 561-392-4972</span>					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					