

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756247

FILED  
Feb 13, 2008  
Secretary of State

**Entity Name:** BAY LAKE ESTATES ASSOCIATION OF NOKOMIS, INC.

**Current Principal Place of Business:**

1200 COLONIA LN. E.  
NOKOMIS, FL 34275 US

**New Principal Place of Business:**

**Current Mailing Address:**

223 FLAMBOYANT ST  
NOKOMIS, FL 34275 US

**New Mailing Address:**

222 FLAMBOYANT ST  
NOKOMIS, FL 34275 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

PARISI, MICHAEL  
223 FLAMBOYANT STREET  
NOKOMIS, FL 34275 US

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

HANNAY, CARLA  
222 FLAMBOYANT STREET  
NOKOMIS, FL 34275 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: HANNAY, CARLA

02/13/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PARISI, MICHAEL  
Address: 223 FLAMBOYANT  
City-St-Zip: NOKOMIS, FL 34275

Title: V ( ) Delete  
Name: ROBINSON, WILLIAM  
Address: 131 CAMELLIA ST  
City-St-Zip: NOKOMIS, FL 34275

Title: T ( ) Delete  
Name: KING, JOAN  
Address: 25 ORANGE BLOSSOM ST  
City-St-Zip: NOKOMIS, FL 34275

Title: D ( ) Delete  
Name: SUIT, RON  
Address: 198 CARISSA ST  
City-St-Zip: NOKOMIS, FL 34275

Title: D ( ) Delete  
Name: CONLEY, CONNIE  
Address: 121 GARDENIA ST  
City-St-Zip: NOKOMIS, FL 34275

Title: D ( ) Delete  
Name: NEUMANN, JAMES  
Address: 142 CAMELLIA ST  
City-St-Zip: NOKOMIS, FL 34275

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

Title: P (X) Change ( ) Addition  
Name: HANNEY, CARLA  
Address: 222 FLAMBOYANT  
City-St-Zip: NOKOMIS, FL 34275

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

Title: T (X) Change ( ) Addition  
Name: FINNELL, JO ANN  
Address: 9 FLAMBOYANT ST  
City-St-Zip: NOKOMIS, FL 34275

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

Title: D (X) Change ( ) Addition  
Name: KING, JOAN  
Address: 25 ORANGE BLOSSOM ST  
City-St-Zip: NOKOMIS, FL 34275

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

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: HANNAY, CARLA

P

02/13/2008

Electronic Signature of Signing Officer or Director

Date