

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90326 021 \*\*\*\*61.25

**DOCUMENT # 760192**

1. Entity Name  
**BAYWOOD VILLAGE HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business  
**E BAYWOOD SQUARE  
DAYTONA BEACH, FL 32119**

Mailing Address  
**ALL FLORIDA REALTY SERVICES  
152 RIDGEWOOD AVENUE  
HOLLY HILL, FL 32117 US**

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

Zip Country

04122006 Chg-NP CR2E037 (11/05)

4. FEI Number  
**59-2350914**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**BECKER & POLIAKOFF  
500 WINDERLEY PLACE  
SUITE 104  
MAITLAND, FL 32751**

**7. Name and Address of New Registered Agent**

Name **Lu Ellen Ransbottom**

Street Address (P.O. Box Number is Not Acceptable)  
**991 Old Mill Road**

City **Ormond Beach** FL **32174**

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 *Lu Ellen Ransbottom* (Lu Ellen RANSBOTTOM, ASSN. MGR) 4/28/06  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25 Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WAGNER, JEANETTE 174 E BAYWOOD SQ DAYTONA BEACH, FL 32119 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS Ruth Leachman 128 Baywood Sq Daytona Beach FL 32119 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P O'ROUVKE, KEVIN 154 E BAYWOOD SQ DAYTONA BEACH, FL 32119 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D John Veray 108 Baywood Sq Daytona Beach FL 32119 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCMAHON, LORI 182 BAYWOOD SQ DAYTONA BEACH, FL 32119 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Christine Hyde 110 Baywood Sq Daytona Beach FL 32119 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FORTIER, MARCUS 130 EAST BAYWOOD SQUARE DAYTONA BEACH, FL 32119 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Paul Bartosiewicz 140 Baywood Sq Daytona Beach FL 32119 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SELLARS, DEBORAH 180 EAST BAYWOOD SQUARE DAYTONA BEACH, FL 32119 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Sellers Deborah 180 E. Baywood Sq Daytona Beach, FL 32119 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Paul DuBois 120 Baywood Sq Daytona Beach FL 32119 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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.

**SIGNATURE:** *Lu Ellen Ransbottom*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #