

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90115 008 ****61.25

DOCUMENT # 761591

1. Entity Name
BAY WATCH CONDOMINIUM ASSOCIATION, INC.



40081269

Principal Place of Business
**1301 BAY DR N
BRADENTON BEACH, FL 34217 US**

Mailing Address
**PO BOX 1607
HOLMES BEACH, FL 34218-1607**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01182008 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0023279

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CONDON, THOMAS E
1007 83RD ST. NW
BRADENTON, FL 34209**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

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, 2008**

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
**P
DEHNER, JEFFREY
9410 HUNTERS CREEK DR
CINCINNATI, OH 45242** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**✓ MARK SEGRAVES
511 W OAKDALE AVE
CHICAGO IL 60657** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
DYSTRA, HELSN
1301 BAY DR N #4A
BRADENTON BEACH, FL 34217** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
3/T ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
OHARROW, BILL
2615 GREEN VALLEY STREET
VALRICO, FL 33594** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SWANSON, KEN
2309 FRANTZ DR
ADOLPHUS, KY 42120** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
REETZ, RON
21317 FIELDCREST DR
ELKHORN, NE 68022** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**M
CONDON, TOM
6400 MANATEE AVE WEST SUITE G
BRADENTON, FL 34209** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P ☐ Change ☐ 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:

Thomas E. Condon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ms. Agent

4/21/08
Date

(24) 779-2223
Daytime Phone #