

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762131

FILED
Apr 30, 2008
Secretary of State

Entity Name: BAHIA DEL SOL II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

806 BAHIA DEL SOL
A
RUSKIN, FL 33575

New Principal Place of Business:

1207 N. HIMES AVE.
SUITE 3
TAMPA, FL 33607

Current Mailing Address:

P.O. BOX 1767
RUSKIN, FL 33575

New Mailing Address:

1207 N. HIMES AVE
SUITE 3
TAMPA, FL 33607

FEI Number: 59-2170493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A.
33 NORTH GARDEN AVE
SUITE 960
CLEARWATER, FL 33755 US

Name and Address of New Registered Agent:

BECKER & POLIAKOFF, P.A.
311 PARK PLACE BLVD.
SUITE 250
CLEARWATER, FL 33759 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:

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MIZER, BILL
Address: 806A BAHIA DEL SOL DR
City-St-Zip: RUSKIN, FL 33570

Title: SD () Delete
Name: BRAND, LOU ANN
Address: 822-A BAHIA DEL SOL DR
City-St-Zip: RUSKIN, FL 33570

Title: VP () Delete
Name: JOACHIM, LINDA
Address: 824D BAHIA DEL SOL DR
City-St-Zip: RUSKIN, FL 33570

Title: T () Delete
Name: DEGRAFF, DAVE
Address: 823B BAHIA DEL SOL DR
City-St-Zip: RUSKIN, FL 33570

Title: D () Delete
Name: MART, DIANA
Address: 809B BAHIA DEL SOL DR
City-St-Zip: RUSKIN, FL 33570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: DEGRAFF, DAVE
Address: 823B BAHIA DEL SOL DR
City-St-Zip: RUSKIN, FL 33570

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: BILL MIZER

PD

04/30/2008

Electronic Signature of Signing Officer or Director

Date