2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762435

FILED Jun 11, 2005 Secretary of State

Entity Name: BAYSHORE SQUARE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: C/O 855 20TH AVE N 3015 S. YSABELLA AVE., SAINT PETERSBURG, FL 33704 UNIT TAMPA, FL 33629 **Current Mailing Address: New Mailing Address:** C/O 855 20TH AVE N 3015 S. YSABELLA AVE., SAINT PETERSBURG, FL 33704 UNIT TAMPA, FL 33629 US FFI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCGANN, PHYLLIS COE, HARRY L PRES 855 20TH AVE N 3015 S. YSABELLA AVE., SAINT PETERSBURG, FL 33704 US UNIT TAMPA, FL 33629 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: HARRY LEE COE, IV, ESQ 06/11/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BELL, MARK P Name: Name: 3015 S YSABELLA UNIT E Address: Address: City-St-Zip: TAMPA, FL 33629 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MCGANN, PHILLIS MS. Name: Address: 855 20TH AVE.. N. Address: City-St-Zip: SAINT PETERSBURG, FL 33704 City-St-Zip: Title: () Delete Title: () Change () Addition GARCIA, ANTHONY Name: Name: 3015 S YSABELLA UNIT F Address: Address: City-St-Zip: TAMPA, FL 33629 City-St-Zip: Title: () Delete Title: P/D (X) Change () Addition Name: COE, HARRY LEE IV Name: COE, HARRY LEE IV 3015 S YSABELLA UNIT A Address: 3015 S YSABELLA UNIT A Address: City-St-Zip: TAMPA, FL 336298160 City-St-Zip: TAMPA, FL 336298160

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HARRY LEE COE, IV, ESQ. P/D 06/11/2005