2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2009
Secretary of State

DOCUMENT# 764807

Entity Name: BAY WINDS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

117 10TH ST N
#121
BRADENTON BEACH, FL 34217 US

New Principal Place of Business:

Current Mailing Address:

117 10TH ST N
#121
BRADENTON BEACH, FL 34217 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LYCANS, CHERYL
117 10TH ST N
#121
BRADENTON BEACH, FL 34217 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MILLER, JAN
Address: 1844 BAUER AVE
City-St-Zip: SANDUSKY, OH 44820

Title: ST ( ) Delete
Name: LYCANS, CHERYL
Address: 117 10TH ST N., #121
City-St-Zip: BRADENTON BEACH, FL 34217

Title: D ( ) Delete
Name: COSTELLO, PETER
Address: 28283 JENEVA WAY
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D ( ) Delete
Name: ZELL, MARY JO
Address: 25115 OAK DR
City-St-Zip: DAMASCUS, MD 20872

Title: P ( ) Delete
Name: LADEWSKI, MITCHELL
Address: 117 10TH ST. N., #121
City-St-Zip: BRADENTON BEACH, FL 34217

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

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: CHERYL LYCANS ST 03/10/2009

Electronic Signature of Signing Officer or Director — Date