

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 764807

**FILED**  
**Feb 15, 2010**  
**Secretary of State**

**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  
Name: MILLER, JAN  
Address: 1844 BAUER AVE  
City-St-Zip: SANDUSKY, OH 44820

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

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

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

Title: P  
Name: LADEWSKI, MITCHELL  
Address: 117 10TH ST. N., #111  
City-St-Zip: BRADENTON BEACH, FL 34217

I hereby 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 all other like empowered.

SIGNATURE: CHERYL LYCANS

ST

02/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date