## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 767707**

FILED Jan 11, 2009 Secretary of State

Entity Name: OYSTER BAY ESTATES ASSOCIATION, INC.

Current D	rinainal Blass	of Business		Navy Deima	simal Dlage e	of Dunings
Current Principal Place of Business:				New Principal Place of Business:		
1730 S. LAKESHORE DR. SARASOTA, FL 34231				1710 N LAKESHORE DR. SARASOTA, FL 34231		
Current Mailing Address:				New Mailing Address:		
1730 S. LAKESHORE DR. SARASOTA, FL 34231				1710 N LAKESHORE DR. SARASOTA, FL 34231		
FEI Number:	: 59-2497995	FEI Number Applied For()	FEI Nun	nber Not App	licable ( )	Certificate of Status Desired ( )
Name and	Address of (	Current Registered Agent:		Name and	Address of	New Registered Agent:
WALCH, ELIZABETH 1730 S. LAKESHORE DR. SARASOTA, FL 34231 US				DOUGHERTY, LAURA 1710 N LAKESHORE DRIVE SARASOTA, FL 34231 US		
	named entity of Florida.	submits this statement for the p	purpose o	f changing i	ts registered	office or registered agent, or both
SIGNATURE: LAURA DOUGHERTY						01/11/2009
	Electro	nic Signature of Registered Ag	ent			Date
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTO		
Title: Name: Address: City-St-Zip:	S ( GOODELL, TH 1903 N LAKES SARASOTA, FI	HORE DR		Title: Name: Address: City-St-Zip:	(	()Change ()Addition
Title: Name: Address: City-St-Zip:	T ( DOUGHERTY, 1710 N. LAKEH SARASOTA, FI	ISORE DR.		Title: Name: Address: City-St-Zip:	P DOUGHERTY 1710 N. LAKI SARASOTA,	EHSORE DR.
Title: Name: Address: City-St-Zip:	D ( GEYER, JOAN 1220 N LAKES SARASOTA, FI	HORE DRIVE		Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D ( MANGIE, CHRI 1810 N LAKES SARASOTA, FI	HORE DR		Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	P ( WALCH, ELIZA 1730 S.LAKES SARASOTA, FI	HORE DR.		Title: Name: Address: City-St-Zip:	ENGELS, CH	SHORE DRIVE
Title: Name: Address: City-St-Zip:	D ( PAVER, DIANA 1919 N. LAKES SARASOTA, FI	SHORE DR.		Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition

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: LAURA DOUGHERTY P 01/11/2009