

FOR PROFIT CORPORATION ANNUAL REPORT

For Office Use Only

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DOCUMENT # **H02029**

1. Entity Name

EAST BAY OAK RESIDENTS, INC



2011 SEP 13 AM 8:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2. Principal Place of Business - No P.O. Box #

601 STARKEY RD

Suite, Apt. #, etc.

3. Mailing Address

601 STARKEY RD #213

Suite, Apt. #, etc.

#213

CR2E034B (1/11)

City & State

LARGO, FL

City & State

LARGO, FL

4. FEI Number

59-2611841

Applied For

Not Applicable

Zip

33771

Country

USA

Zip

33771

Country

USA

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name **DUANE MAHONY**

Street Address (P.O. Box Number is Not Acceptable)

601 STARKEY RD

#213

City

LARGO

FL

Zip Code

33771

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when re-instating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$650.00

Amended AR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution. Added to Fees

E-mail Address:

dlmahony@yahoo.com

E-mail address to be used for future annual report notices.

10. OFFICERS AND DIRECTORS

| | |
|----------------|---------------------|
| TITLE | DP |
| NAME | CAROL BLAUVELT |
| STREET ADDRESS | 601 STARKEY RD #254 |
| CITY-ST-ZIP | LARGO, FL 33771 |
| TITLE | DVP |
| NAME | DOUG SCHWARTZ |
| STREET ADDRESS | 601 STARKEY RD #178 |
| CITY-ST-ZIP | LARGO, FL 33771 |
| TITLE | DT |
| NAME | DUANE MAHONY |
| STREET ADDRESS | 601 STARKEY RD #213 |
| CITY-ST-ZIP | LARGO, FL 33771 |
| TITLE | DS |
| NAME | DEAN DEMARRE |
| STREET ADDRESS | 601 STARKEY RD #19 |
| CITY-ST-ZIP | LARGO, FL 33771 |
| TITLE | D |
| NAME | WALTER KELLY |
| STREET ADDRESS | 601 STARKEY RD #228 |
| CITY-ST-ZIP | LARGO, FL 33771 |
| TITLE | D |
| NAME | GARY McDONALD |
| STREET ADDRESS | 601 STARKEY RD #115 |
| CITY-ST-ZIP | LARGO, FL 33771 |

600207108976

09/13/11-01004-003 **400.00

600207108976

05/03/11-01022-022 **158.75

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8/9/13

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes, and that my name appears in Block 10 or on an attachment with an address, with all other like empowered. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.812.155 F.S.

SIGNATURE

[Signature] **DUANE MAHONY**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/11

DATE

727-536-5046

Daytime Phone #