

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004190

FILED
Apr 16, 2007
Secretary of State

Entity Name: THE BAXLEY MANOR RESIDENT COUNCIL, INC.

Current Principal Place of Business:

630 KUREK CT.
263
MERRITT ISLAND, FL 32953

New Principal Place of Business:

Current Mailing Address:

630 KUREK CT.
263
MERRITT ISLAND, FL 32953

New Mailing Address:

FEI Number: 59-3655050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SKINNER, JAMES
630 KUREK CT., #263
MERRITT ISLAND, FL 32953 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: P () Delete
Name: SKINNER, JAMES
Address: 630 KUREK CT., #263
City-St-Zip: MERRITT ISLAND, FL 32953

Title: V () Delete
Name: HOPKINS, JOHN
Address: 630 KUREK CT., #135
City-St-Zip: MERRITT ISLAND, FL 32953

Title: S () Delete
Name: SELPH, BETH
Address: 630 KUREK CT., #276
City-St-Zip: MERRITT ISLAND, FL 32953

Title: T () Delete
Name: MITCHELL, JAMES
Address: 630 KUREK CT., #180
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: PRIOLETTE, SANDRA
Address: 600 KUREK CT., #229
City-St-Zip: MERRITT ISLAND, FL 32953

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: HOPKINS, JOHN D
Address: 630 KUREK CT., #135
City-St-Zip: MERRITT ISLAND, FL 32953

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

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

Title: D (X) Change () Addition
Name: WINANS, EDWARD
Address: 600 KUREK CT.
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Change (X) Addition
Name: BRIGHTMAN, NANCY
Address: 600 KUREK CT.
City-St-Zip: MERRITT ISLAND, FL 32953

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN D. HOPKINS

V

04/16/2007

Electronic Signature of Signing Officer or Director

Date