## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00535

FILED Feb 10, 2009 Secretary of State

Entity Name: BAYVIEW OF BRADENTON BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
108 9TH ST BRADENT	TREET S ON BEACH, FL 3	4217 US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX 1 HOLMES B	1607 BEACH, FL 34218	US			
FEI Number:	59-2362767 FI	El Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Curr	ent Registered Agent:	Name and Address	of New Registered Agent:	
1007 83RD	BÉACH PROP MG				
	named entity subr of Florida.	nits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR					
	Electronic S	ignature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Dele BLACKMORE, ROBI 58 THE PARK GREAT BOOKHAM,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VT () Dele MORENO, MARCO 620 MORNINGSIDE		Title: Name: Address:	( ) Change ( ) Addition	
City-St-Zip:	CROWN POINT, IN		City-St-Zip:		
		46307 ete DR		( ) Change ( ) Addition	
City-St-Zip: Title: Name: Address:	CROWN POINT, IN  S () Dele  MORENO, SUE 620 MORNINGSIDE	46307 ete DR 46307 ete	City-St-Zip: Title: Name: Address:	( ) Change ( ) Addition ( ) 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: ROBIN BLACKMORE PD 02/10/2009