2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002179

FILED Feb 24, 2009 Secretary of State

Entity Name: BAY ISLE AT BLACK LAKE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2582 SOUTH MAGUIRE RD 318 OCOEE, FL 34761 **New Mailing Address: Current Mailing Address:** P.O. BOX 783367 WINTER GARDEN, FL 34778 FEI Number: 03-0454886 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SOLOMON, SPENCER R 14443 PRUNNING WOOD PLACE WINTER GARDEN, FL 34787 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition BALDERRAMA, JAMES ANTOINE, ALEX Name: Name: 14315 HAMPSHIRE BAY CIRCLE Address: 14200 HAMPSHIRE BAY CIR Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: WINTER GARDEN, FL 34787 Title: Title: () Delete () Change () Addition Name: FOSTER, TOM Name: Address: 14213 HAMPSHIRE BAY CIR Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: Title: () Delete Title: SD (X) Change () Addition ANTOINE, ALEX COOLEY, RACHEL Name: Name: 14200 HAMPSHIRE BAY CIR 14338 HAMPSHIRE BAY CIR Address: Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: WINTER GARDEN, FL 34787 () Delete Title: Title: TD () Change (X) Addition Name: Name: BARTLETT, RICHARD 14225 HAMPSHIRE BAY CIR Address: Address: City-St-Zip: City-St-Zip: WINTER GARDEN, FL 34787

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: SPENCER SOLOMON RA 02/24/2009