

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

page 1 of 2

| | |
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| DOCUMENT # N01000006304 | |
| 1. Entity Name BAYSIDE GATE COMMUNITY ASSOCIATION INC. | |



FILED

04 APR 16 PM 2:52

66415716 SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| | |
|---|---|
| Principal Place of Business 898 ARTHUR ST., SE PALM BAY, FL 32909 | Mailing Address 898 ARTHUR ST., SE PALM BAY, FL 32909 |
|---|---|



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|---|--|
| 2. Principal Place of Business 899 GRANDEUR ST SE. | 3. Mailing Address 899 GRANDEUR ST SE |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |

03302004 Chg-NP CR2E037 (10/03)

| | |
|-----------------------------|-----------------------------|
| City & State PALM BAY FL | City & State PALM BAY FL |
| Zip 32909 | Country USA |

| | |
|---|-------------------------------|
| 4. FEI Number NOT APPLICABLE | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | |

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| 6. Name and Address of Current Registered Agent ELLIOTT, TERESIA 899 GRANDUER ST. SE. PALM BAY, FL 32909 |
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| 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code |
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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 <i>Teresia Elliott</i> | TERESIA ELLIOTT, PRESIDENT | APRIL 14, 2004 |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | |

| | | |
|---|---|--|
| Filing Fee is \$61.25 Due by May 1, 2004 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | Make check payable to Florida Department of State |
|---|---|--|

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD ELLIOTT, TERESIA 899 GRANDEUR ST. SE PALM BAY, FL 32909 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD LAYTON, RUPERT 490 CHELTENHAM AVE. SE. PALM BAY, FL 32909 <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD MCGILL, SANDRA 3448 JUPITER BLVD. SE PALM BAY, FL 32909 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD CHIRUMBLD, CELESTINE 1099 DUNHAM ST. SE. PALM BAY, FL 32909 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D ESSERT, RICHARD 261 COMET AVENUE SE PALM BAY, FL 32909 <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SAAD CATLOW, ROBERT 731 AUGUST SE PALM BAY, FL 32909 <input checked="" type="checkbox"/> Delete |

| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD ROBERT CATLOW 731 AUGUST ST. SE. PALM BAY FL 32909 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | 200033799202 04/26/04--01010--007 ***70.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D JAMES SHELDON 1699 EMERSON DR. SE PALM BAY FL 32909 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SAAD CHARLES WILLIAMS 658 AUGUST ST SE PALM BAY FL 32909 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |

| | | |
|---|--------------------------------|--------------|
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | |
| SIGNATURE: <i>Teresia Elliott</i> | TERESIA ELLIOTT, PRES. 4-14-04 | 321 984 3235 |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # | | |

Attachment

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#1101000006304

BAYSIDE GATE COMMUNITY ASSOCIATION INC.

2003 - 2004

PRESIDENT/Director

**Teresia Elliott
899 Grandeur St SE
Palm Bay FL 32909
984-3235**

VICE PRES/Director

**Robert Catlow
731 August St SE
Palm Bay FL 32909
723-0165**

SECRETARY/Director

**Celestine Chirumblo
1099 Dunham St SE
Palm Bay FL 32909
956-7786**

TREASURER/Director

**Sandra McGill
3448 Jupiter Bl SE
Palm Bay FL 32909
725-1932**

SGT at ARMS/Director

**Charles Williams
658 August St SE
Palm Bay FL 32909
725-1571**

BOARD OF DIRECTORS

**Arthur McGill
3448 Jupiter Bl SE
Palm Bay FL 32909
725-1932**

**Emanuel Allen
711 August St SE
Palm Bay FL 32909
676-4519**

**James Sheldon
1699 Emerson Dr SE
Palm Bay FL 32909
951-9947**

**Rupert Layton
490 Cheltenham Ave SE
Palm Bay FL 32909
725-9277**