## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000001894

FILED Jan 09, 2004 Secretary of State

Entity Name: BAY HARBOR ISLANDS CITIZENS COALITION, INC. **Current Principal Place of Business: New Principal Place of Business:** 10140 WEST BAY HARBOR DRIVE #201 BAY HARBOR ISLANDS, FL 33154 **Current Mailing Address: New Mailing Address:** PO BOX 54-5834 BAY HARBOR ISLANDS, FL 331545834 FEI Number: 75-3029828 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: WISS, ILONA ESQ WALLACE, CHARLES E 9300 WEST BAY HARBOR DRIVE, ATTN: GIBBS & WISS 215 GRAND AVE BAY HARBOR ISLANDS, FL 33154 US MIAMI, FL 33133 US 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: CHARLES E. WALLACE 01/09/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LUCK. SUSAN Name: Name: 10180 WEST BAY HARBOR DRIVE Address: Address: City-St-Zip: BAY HARBOR ISLANDS, FL 33154 City-St-Zip: Title: VPD Title: ( ) Delete () Change () Addition COPELAND, TARYN Name: Name: Address: 1001 91ST STREET Address: City-St-Zip: BAY HARBOR ISLANDS, FL 33154 City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete REID, KELLY LEONARD, JORDAN Name: Name: 9801 EAST BAY HARBOR DRIVE 9302 EAST BAY HARBOR DRIVE Address: Address: City-St-Zip: BAY HARBOR ISLANDS, FL 33154 City-St-Zip: BAY HARBOR ISLANDS, FL 33154 Title: TD () Delete Title: () Change () Addition Name: SILVER, JANICE Name: 10140 W. BAY HARBOR DR. #201 Address: Address: City-St-Zip: BAY HARBOR ISLANDS, FL 33154 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition WALLACE, CHUCK WALLACE, CHARLES Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Address:

City-St-Zip:

SIGNATURE: CHARLES E. WALLACE D 01/09/2004

9300 W. BAY HARBOR DR.

BAY HARBOR ISLANDS, FL 33154

Address:

City-St-Zip:

9300 W. BAY HARBOR DR.

BAY HARBOR ISLANDS, FL 33154