

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002735

FILED
Apr 30, 2008
Secretary of State

Entity Name: BAY PINE VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 36157
PENSACOLA, FL 32516

New Principal Place of Business:

1850 TILLMAN CIRCLE
PENSACOLA, FL 32526

Current Mailing Address:

P.O. BOX 36157
PENSACOLA, FL 32516

New Mailing Address:

FEI Number: 01-0699916

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTHEWS, EDESEL F JR
308 S. JEFFERSON STREET
PENSACOLA, FL 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: PD () Delete
Name: CAMPUS, JOSEPH
Address: 1311 SOUNDVIEW TRAIL
City-St-Zip: GULF BREEZE, FL 32561

Title: STD () Delete
Name: JONES, BECKY
Address: 497 BAY PINE VILLAS DR.
City-St-Zip: PENSACOLA, FL 32506

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: JONES, BECKY
Address: 1850 TILLMAN CIRCLE
City-St-Zip: PENSACOLA, FL 32526

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: BECKY JONES

STD

04/30/2008

Electronic Signature of Signing Officer or Director

Date