

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004316

FILED  
Apr 08, 2009  
Secretary of State

**Entity Name:** BAYSIDE BUSINESS PARK CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

796 SANDERS ROAD  
SUITE 1  
PORT ORANGE, FL 32127

**New Principal Place of Business:**

**Current Mailing Address:**

796 SANDERS ROAD  
SUITE 1  
PORT ORANGE, FL 32127

**New Mailing Address:**

**FEI Number:** 57-1147674

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DENTON, PAUL C  
796 SANDERS ROAD  
SUITE 1  
PORT ORANGE, FL 32127 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: DP ( ) Delete  
Name: DENTON, PAUL C  
Address: 796 SANDERS ROAD, SUITE 1  
City-St-Zip: PORT ORANGE, FL 32127

Title: DST ( ) Delete  
Name: DENTON, LORI D  
Address: 796 SANDERS ROAD, SUITE 1  
City-St-Zip: PORT ORANGE, FL 32127

Title: D ( ) Delete  
Name: PAYAS, JAMES W  
Address: 794 SANDERS ROAD, STE 1  
City-St-Zip: PORT ORANGE, FL 32127

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: LORI DENTON

DST

04/08/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date