

131 **2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Jun 29, 2006 8:00 am
Secretary of State

05-03-2006 90196 050 ****61.25

DOCUMENT # N02000007555 1. Entity Name EAST BAY LAKES HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business 2630 SOUTH FALKENBURG RIVERVIEW FL 33569		Mailing Address 2880 SCHERER DRIVE NORTH SUITE 840 SAINT PETERSBURG FL 33716	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 2870 Scherer Dr. N. 100	
City & State St. Petersburg FL		4. FEI Number 55-0824276	
Zip 33716		Country USA	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		1st MOORE CR2E037 (10/05)	
6. Name and Address of Current Registered Agent COFFERILL, RON 400 TAMPA ST #2625 TAMPA FL 33602		7. Name and Address of New Registered Agent Name RON Cofferrill Street Address (P.O. Box Number is Not Acceptable) 1010 N. Florida Ave City Tampa FL Zip Code 33602	
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 <u><i>Ronald E. Cofferrill</i></u> DATE 4-13-06 Signature, typed or printed name of registered agent and date of signature. (NOTE: Registered Agent signature is required when certifying)			
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D BEST, DAVINA 9429 CYPRESS HARBOR DRIVE GIBSON FL	TITLE NAME STREET ADDRESS CITY- ST- ZIP	PRESIDENT Angie Fratercangelo 9719 Cypress Harbour Dr Gibsonton, FL 33534
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D BLOCKTON, TYRONE 9643 CYPRESS HARBOR DRIVE GIBSON FL	TITLE NAME STREET ADDRESS CITY- ST- ZIP	SECRETARY Maxine Harper Hayes 9719 Cypress Harbour Dr Gibsonton, FL 33534
TITLE NAME STREET ADDRESS CITY- ST- ZIP	T JUNE, ROB 2630 SOUTH FALKENBURG RIVERVIEW FL 33569	TITLE NAME STREET ADDRESS CITY- ST- ZIP	TREASURER Mike Pibber 9414 Cypress Harbour Dr. Gibsonton, FL 33534
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 information.			
SIGNATURE: <u><i>Angie Fratercangelo</i></u> DATE 4/9/06 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			