

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 29, 2005 8:00 am
Secretary of State

03-29-2005 90008 037 ****61.25

DOCUMENT # N02050

1. Entity Name

THE VILLAS OF BAY VILLA CONDOMINIUM
ASSOCIATION, INC.



Principal Place of Business

Mailing Address

% DINORAH L. ERB "DEE"
1506C BAY VILLA PLACE S.
TAMPA FL 33629

% DINORAH L. ERB "DEE"
1506C BAY VILLA PLACE S.
TAMPA FL 33629

2. Principal Place of Business

% Crystal Coovert

Suite, Apt. #, etc.
1508 "A" Bay Villa Pl. S.

City & State

Tampa, Florida

Zip

33629-4740 Hillsborough

3. Mailing Address

% Crystal Coovert

Suite, Apt. #, etc.
1508 "A" Bay Villa Pl. S.

City & State

Tampa, Florida

Zip

33629-4740 Hillsborough



1st MOORE

CR2E037 (10/04)

4. FEI Number 59-2871340
~~NOT APPLICABLE~~

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name

Crystal Coovert

Street Address (P.O. Box Number is Not Acceptable)

1508 "A" Bay Villa Pl. S.

City

Tampa

FL

Zip Code

33629-4740

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

03-08-05

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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

TITLE PD ☐ Delete
NAME NEELY, RICHARD
STREET ADDRESS 1508 "C" BAY VILLA PLACE S.
CITY- ST- ZIP TAMPA FL

TITLE SD ☒ Delete
NAME ERB, DINORAH L "DEE"
STREET ADDRESS 1506 "C" VILLA PLACE. S.
CITY- ST- ZIP TAMPA FL

TITLE TD ☐ Delete
NAME QUIGLEY, HELEN
STREET ADDRESS 1506 B BAY VILLA PL S
CITY- ST- ZIP TAMPA FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE SD ☒ Change ☐ Addition
NAME Coovert, Crystal
STREET ADDRESS 1508 "A" Bay Villa Pl. S
CITY- ST- ZIP Tampa, Florida 33629-4740

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Crystal Coovert

03-08-05

Date

Telephone #

(813) 299-2417