

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02174

FILED
Jan 16, 2009
Secretary of State

Entity Name: THE TIKI BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6504 SURFSIDE BLVD
UNIT 7
APOLLO BCH, FL 33572 US

New Principal Place of Business:

Current Mailing Address:

6504 SURFSIDE BLVD
UNIT 7
APOLLO BCH, FL 33572 US

New Mailing Address:

FEI Number: 59-2413683 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WITSIL, R L
6504 SURFSIDE BLVD
UNIT 7
APOLLO BEACH, FL 33572 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: D () Delete
Name: WITSIL, ROBERT L
Address: 6504 SURFSIDE BLVD #7
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: D () Delete
Name: HARRIS, R
Address: 6504 SURFSIDE BLVD #1
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: D () Delete
Name: GROGAN, B
Address: 6504 SURFSIDE BLVD #5
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: D () Delete
Name: KINCART, R
Address: 6504 SURFSIDE BLVD #2
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: D () Delete
Name: LINDSAY, R
Address: 6504 SURFSIDE BLVD #6
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: D (X) Delete
Name: GRAF, D
Address: 6504 SURFSIDE BLVD #8
City-St-Zip: APOLLO BEACH, FL 33572 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: MARTIN, DAN
Address: 6504 SURFSIDE BLVD #3
City-St-Zip: APOLLO BEACH, FL 33572 US

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: R L WITSIL

D

01/16/2009

Electronic Signature of Signing Officer or Director

Date