

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02922

1. Entity Name

BAY PINES MOBILE HOME PARK HOMEOWNERS ASSOCIATIO

FILED

Feb 22, 2000 8:00 am
Secretary of State

02-22-2000 90047 006 ****61.25

Principal Place of Business % WILLIAM HAYKO 10005 BAY PINES BLVD ST. PETERSBURG FL 33708	Mailing Address % WILLIAM HAYKO 10005 BAY PINES BLVD LOT 851 ST. PETERSBURG FL 33708-3284 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

4. FEI Number 59-2869338	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75-Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HAYKO, WILLIAM
10005 BAY PINES BLVD., LOT 851
ST. PETERSBURG FL

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HAYKO, WILLIAM 10005 BAY PINES BV-L851 ST. PETERSBURG FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP O'MARA, ROSE 10005 BAY PINES BLVD, 16 BIC DR ST. PETERSBURG FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SMITH, JOHN 10000 S BAY PINES BLVD, LOT 1159 ST. PETERSBURG FL 33708	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GERBER, JOHN 10005 BAY PINES BLVD LOT 1965 ST. PETERSBURG FL 33708	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COSTELLO, DAVID D 10005 BAY PINES BLVD LOT 431 ST. PETERSBURG FL 33708	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VARONE, JOHN 10005 BAY PINES BV-L1681 ST. PETERSBURG FL	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: William J Hayko 16 Feb 2000 - 121-397-0880
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #