2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 05, 2004 8:00 am
Secretary of State
04-05-2004 90008 004 ****61.25

54026097

MOORE CR2E037 (11/03)

DOCUMENT # N02922

1. Entity Name

BAY PINES MOBILE HOME PARK HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
% WILLIAM HAYKO 10005 BAY PINES BLVD ST. PETERSBURG FL 33708	% WILLIAM HAYKO 10005 BAY PINES BLVD LOT 851 ST. PETERSBURG FL 33708 US

2. Principal Place of Business	3. Mailing Address
% Pauline Menard	% Pauline MENARD
Suite, Apt. #, etc.: 10005 Bay Pines Blvd #1476	Suite, Apt. #, etc.: 10005 Bay Pines Blvd #1476
City & State: St Petersburg, Fl	City & State: St. Petersburg, Fl
Zip: 33708 Country: Pinellas	Zip: 33708 Country: Pinellas

4. FEI Number: 59-2869338 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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: PAULINE MENARD
Street Address (P.O. Box Number is Not Acceptable): 10005 BAY PINES Blvd Lot-1476
City: ST PETERSBURG FL Zip Code: 33708

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: Pauline Menard Pauline Menard 3-31-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2004

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	PD HAYKO, WILLIAM 10005 BAY PINES BV-L851 ST. PETERSBURG FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT PAULINE MENARD 10005 Bay Pines Blvd - 1476 ST. PETERSBURG - FL 33708 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP O'MARA, ROSE 10005 BAY PINES BLVD, 16 BIC DR ST. PETERSBURG FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V. PRESIDENT RAY KENT 10005 BAY PINES Blvd - 1914 ST. PETERSBURG - FL - 33708 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SMITH, JOHN 10005 BAY PINES BLVD LOT 1159 SAINT PETERSBURG FL 33708	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY ANN CAMERON Lot 411 10005 BAY PINES Blvd ST PETERS burg, Fl, 33708 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CORCORAN, TOM 16005 BAY PINES BLVD LOT 1937 ST. PETERSBURG FL 33708	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEO PIENSKI 10005 BAY PINES Blvd Lot-1012 ST. PETERSBURG, Fl. — 33708 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COSTELLO, DAVID D 10005 BAY PINES BLVD LOT 431 ST. PETERSBURG FL 33708	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GORDON TRINKWON 10005 BAY Pines Blvd - Lot-1383 St. Petersburg, Fl 33708 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARRANGER, SHEILA 10005 BAY PINES BLVD LOT 1195 SAINT PETERSBURG FL 33708	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Janet Cook 10005 Bay Pines Blvd - Lot. 1702 St. Petersburg, Fl. 33708 ☐ Change ☐ 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: Pauline Menard Pauline Menard 3-31-04 727-319-4985
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #