2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000193

FILED Apr 28, 2009 Secretary of State

Entity Name: THE BAYSIDE CONDOMINIUM ASSOCIATION OF TAMPA, INC.

Current Principal Place of Business: New Principal Place of Business: 3232 S MACDILL AVE 3001 EXECUTIVE DRIVE TAMPA, FL 33629 SUITE 260 CLEARWATER, FL 33762 **Current Mailing Address:** New Mailing Address: 777 S HARBOUR ISLAND BLVD 5001 4TH STREET N. STE 270 SUITE A TAMPA, FL 33602 ST. PETERSBURG, FL 33734 FEI Number: 32-0052360 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CONDOMINIUM ASSOCIATES LANG & BROWN P.A. 777 S HARBOR ISLAND BLVD, STE 270 5001 4TH STREET N. TAMPA, FL 33602 SUITE A CLEARWATER, FL 33734 US 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: SHAWN BROWN 04/28/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete PTD () Change () Addition SHELTON, JUDY Name: Name: 3232 S. MCDILL AVENUE #201 Address: Address: City-St-Zip: TAMPA, FL 33629 City-St-Zip: Title: VDT () Delete Title: (X) Change () Addition Name: HUGHES, BRANDI Name: CALLAHAN, WOODY Address: 3232 S MACDILL AVENUE #205 Address: 3232 S MACDILL AVENUE #102 City-St-Zip: TAMPA, FL 33629 City-St-Zip: TAMPA, FL 33629 Title: () Delete Title: () Change () Addition PURCELL, CHARLIE Name: Name: 3232 S. MACDILL AVENUE #208 Address: Address: City-St-Zip: TAMPA, FL 33629 City-St-Zip: Title: DS () Delete Title: () Change () Addition ASTWOOD, JILL Name: Name: Address: 3232 S MACDILL AVE Address: City-St-Zip: TAMPA, FL 33629 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: JUDY SHELTON P 04/28/2009