

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003771

FILED  
Jan 12, 2012  
Secretary of State

**Entity Name:** BAYLOFTS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

455 NE 25TH ST  
MIAMI, FL 33137

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 960726  
MIAMI, FL 33296

**New Mailing Address:**

**FEI Number:** 03-0517227

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BETTS PROPERTY MANAGEMENT  
14902 SW 82ND LANE  
#202  
MIAMI, FL 33193 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: PD  
Name: GUY, ROBLES  
Address: 455 NE 25 ST #807  
City-St-Zip: MIAMI, FL 33137

Title: D  
Name: NELSON, CHRIS  
Address: 455 NE 25 ST #910  
City-St-Zip: MIAMI, FL 33137

Title: SD  
Name: BENDELDT, MARIA  
Address: 455 NE 25TH ST, # 808  
City-St-Zip: MIAMI, FL 33137

Title: TD  
Name: CONROY, FRANCES  
Address: 455 NE 25 ST. #508  
City-St-Zip: MIAMI, FL 33137

Title: VPD  
Name: CIPRIANI, CHRISTIAN  
Address: 455 NE 25 ST. #506  
City-St-Zip: MIAMI, FL 33137

Title: D  
Name: OZEN, TULIN  
Address: 455 NE 25 ST. #502  
City-St-Zip: MIAMI, FL 33137

I hereby 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 all other like empowered.

SIGNATURE: DAVID E. BETTS

MNGR

01/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date