

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2007 8:00 am
Secretary of State

02-08-2007 90053 045 ****61.25

DOCUMENT # N03000005085

1. Entity Name

BAYSIDE ESTATES OWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

644 FLORIDA AVE
PANAMA CITY FL 32401

PO BOX 1306
PANAMA CITY FL 32402



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Unit G

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

20-0565737

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GREGORY, G. B.
644 FLORIDA AVE UNIT C
PANAMA CITY FL 32401

Name

ELIZABETH MOORE

Street Address (P.O. Box Number is Not Acceptable)

644 FLORIDA AVE Unit G

City

Panama City

FL

Zip Code

32401

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

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, 2007

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 ☒ P ☐ Delete
NAME GREGORY, G.B.
STREET ADDRESS 644 FLORIDA AVE UNIT C
CITY ST ZIP PANAMA CITY FL 32401

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☒ VP ☒ Delete
NAME GALLINA, TONY
STREET ADDRESS 644 FLORIDA AVE UNIT D
CITY ST ZIP PANAMA CITY FL 32401

TITLE ☒ P ☒ Change ☐ Addition
NAME MOORE, Elizabeth
STREET ADDRESS 644 Florida Ave. Unit G
CITY ST ZIP Panama City, FL 32401

TITLE ☐ S/T ☐ Delete
NAME FRIDLEY, RANDY
STREET ADDRESS 644 FLORIDA AVE UNIT E
CITY ST ZIP PANAMA CITY FL 32401

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/27/07