

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008473

FILED  
Jan 15, 2008  
Secretary of State

Entity Name: BAYVIEW SUBDIVISION HOMEOWNERS, INC.

**Current Principal Place of Business:**

32 BEAL PARKWAY SW  
FORT WALTON BEACH, FL 325485391

**New Principal Place of Business:**

**Current Mailing Address:**

32 BEAL PARKWAY SW  
FORT WALTON BEACH, FL 325485391

**New Mailing Address:**

FEI Number: 58-2680178

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DAY, GEORGE E  
32 BEAL PARKWAY SW  
FORT WALTON BEACH, FL 325485391 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 ( ) Delete  
Name: DYESS, CHARLES  
Address: 917 MIDDLE DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: VD ( ) Delete  
Name: MURRAY, DONALD  
Address: 917 MIDDLE DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: SD ( ) Delete  
Name: BAIN, BEVERLY  
Address: 914 SE BEACHVIEW DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: TD ( ) Delete  
Name: BAIN, BILL  
Address: 914 SE BEACHVIEW DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32548

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: BAIN, BEVERLY  
Address: 914 SE BEACHVIEW DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: TD (X) Change ( ) Addition  
Name: BAIN, BILL  
Address: 914 SE BEACHVIEW DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32547

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: BILL BAIN

TD

01/15/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date