

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03621

FILED
Apr 08, 2009
Secretary of State

Entity Name: THE BAYOU CLUB PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

100 BAYOU DR
SATSUMA, FL 32189 US

New Principal Place of Business:

Current Mailing Address:

124 BAYOU DRIVE
SATSUMA, FL 32189 US

New Mailing Address:

FEI Number: 59-2932427

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROZIER, SAMUEL L
139 BAYON DR
SATSUMA, FL 32189 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: PRES () Delete
Name: ROZIER, SAMUEL
Address: 139 BAYOU DR
City-St-Zip: SATSUMA, FL 32189

Title: VP () Delete
Name: MINCEY, AL VP>
Address: 124 BAYOU DRIVE
City-St-Zip: SATSUMA, FL 32189

Title: T () Delete
Name: GRACE, PATRIA
Address: 112 PINE LAKE DR
City-St-Zip: SATSUMA, FL 32189

Title: DR. () Delete
Name: GRAY, WILLA
Address: 152 PINE LAKE DR
City-St-Zip: SATSUMA, FL 32189

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: GRAY, BILLIE
Address: 152 PINE LAKE DR
City-St-Zip: SATSUMA, FL 32189

Title: VP (X) Change () Addition
Name: HATFIELD, TOM VP>
Address: 132 PINE LAKE DR
City-St-Zip: SATSUMA, FL 32189

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

Title: SEC (X) Change () Addition
Name: VOORHIS, MARGE
Address: 109 BAYOU DR
City-St-Zip: SATSUMA, FL 32189

Title: D () Change (X) Addition
Name: GRAY, BILL
Address: 152 PINE LAKE DR
City-St-Zip: SATSUMA, FL 32189

Title: D () Change (X) Addition
Name: TALBOT, ED
Address: 145 PINE LAKE DR
City-St-Zip: SATSUMA, FL 32189

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: GRACE PATRIA

TREA

04/08/2009

Electronic Signature of Signing Officer or Director

Date