

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002140

FILED  
Apr 27, 2005  
Secretary of State

**Entity Name:** BAY HARBOR WEST ISLAND HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1310 99TH ST.  
BAY HARBOR ISLANDS, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

1310 99TH ST.  
BAY HARBOR ISLANDS, FL 33154

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CHEPENIK, BART H  
1177 KANE CONCOURSE, SUITE 104  
BAY HARBOR ISLANDS, FL 33154 US

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

CHEPENIK, BART H  
1177 KANE CONCOURSE, SUITE 232  
BAY HARBOR ISLANDS, FL 33154 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: BART H. CHEPENIK

04/27/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ESKIN, KEN  
Address: 1310 99TH ST.  
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: TD ( ) Delete  
Name: CHEPENIK, BART H  
Address: 1310 99TH ST.  
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: D ( ) Delete  
Name: RUBIN, RANDALL G  
Address: 1351 97TH ST.  
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: D ( ) Delete  
Name: FEINSTEIN, ADAM  
Address: 1271 94TH ST.  
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: D ( ) Delete  
Name: FRANKEL, JED  
Address: 1231 99TH ST.  
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: D (X) Delete  
Name: KARSON, ARDEN  
Address: 9550 BROADVIEW TERR.  
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

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

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KEN ESKIN

PD

04/27/2005

Electronic Signature of Signing Officer or Director

Date