

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002140

FILED
Apr 16, 2009
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: 26-0230521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHEPENIK, BART H
12000 BISCAYNE BOULEVARD
SUITE 401
BAY HARBOR ISLANDS, FL 33154 US

Name and Address of New Registered Agent:

ESKIN, KEN
1310 99TH ST.
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: KEN ESKIN

04/16/2009

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

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

Title: D (X) Delete
Name: FRANKEL, JED
Address: 1231 99TH ST.
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:

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: KEN ESKIN

PD

04/16/2009

Electronic Signature of Signing Officer or Director

Date