

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006152

FILED  
Mar 05, 2012  
Secretary of State

**Entity Name:** BAYOU BONITA NEIGHBORHOOD, INC.

**Current Principal Place of Business:**

2255 5 AVE N  
ST PETERSBURG, FL 33713

**New Principal Place of Business:**

**Current Mailing Address:**

2255 5 AVE N  
ST PETERSBURG, FL 33713

**New Mailing Address:**

**FEI Number:** 20-8690303

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHERER, PAUL C  
4930 SUNRISE DR S  
ST PETERSBURG, FL 33705 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: D  
Name: SCHERER, PAUL  
Address: 2255 5TH AVE.  
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: DP  
Name: TAYLOR, ANN  
Address: 4636 SUNRISE DR S  
City-St-Zip: ST PETERSBURG, FL 33705

Title: D  
Name: WOLFE, JANE  
Address: 4810 PARADISE DR S  
City-St-Zip: ST PETERSBURG, FL 33705

Title: T  
Name: LETELLIER, DAWN  
Address: 2255 5TH AVE.  
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: D  
Name: WENZEL, CHRIS  
Address: 4000 4 ST S  
City-St-Zip: ST PETERSBURG, FL 33705

Title: DV  
Name: HASTINGS, ROY  
Address: 360 41 AVE S  
City-St-Zip: ST PETERSBURG, FL 33705

I hereby 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 all other like empowered.

SIGNATURE: PAUL C. SCHERER

D

03/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date