

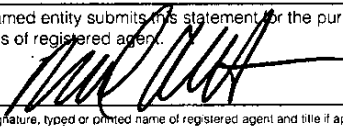
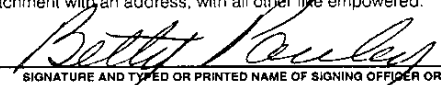


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2007 8:00 am
Secretary of State

02-22-2007 90006 046 ****61.25

DOCUMENT # N04000007356 1. Entity Name BAYSIDE ESTATES HOMEOWNERS, INC.					
Principal Place of Business 17601 SAN CARLOS BLVD FORT MYERS BEACH, FL 33931			Mailing Address 17601 SAN CARLOS BLVD FORT MYERS BEACH, FL 33931		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		02022007 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 20-1979793	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent IRVIN, MICHAEL 11051 BAYSIDE LANE FORT MYERS BEACH, FL 33931			7. Name and Address of New Registered Agent Name RICHARD DEBOST Street Address (P.O. Box Number is Not Acceptable) 1415 HENDRY ST. City FORT MYERS FL Zip Code 33901		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small>			DATE 2/20/07 <small>(NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP KRAFT, JERRY 11341 DOGWOOD LN FORT MYERS BEACH, FL 33931	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ALBERT, JAMES 17540 STEVENS BLVD. FORT MYERS BEACH, FL 33931	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	P NELLIE SHAWER 17891 PEAPACK DR. FT MYERS BEACH, FL 33931
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S HEIDEMANN, JORGEN 17630 PRIMROSE CT FORT MYERS BEACH, FL 33931	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST PAULEY, BETTY 17621 STEVENS BLVD FORT MYERS BEACH, FL 33931	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BERTSCH, ED 11341 CYPRESS LANE FORT MYERS BEACH, FL 33931	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RAYMOND HARTLINE 11331 BAYSIDE BLVD FORT MYERS BEACH, FL 33931
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BLOUIN, RICH 17670 CANAL COVE CT FORT MYERS BEACH, FL 33931	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 1/8/07 Daytime Phone # 239-454-5437		