## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000008443

FILED Jan 23, 2009 Secretary of State

Entity Name: BAYCREST AT THE BROOKS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:			New Pr	New Principal Place of Business:		
	ROPERTY MA ER ROAD #4 L 34109	NAGEMENT				
Current Mailing Address:			New Ma	New Mailing Address:		
NEWELL PROPERTY MANAGEMENT 5435 JAEGER ROAD #4 NAPLES, FL 34109						
FEI Number: 20-1582906 FEI Number Applied For ( ) FEI		FEI Number Not A	lumber Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
5435 JAEG		/ MANAGEMENT				
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:						
	Electroni	Signature of Registered Agen	t		Date	
OFFICERS AND DIRECTORS:			ADDITI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD ( ) I POPPER, CHAR 22533 BAYCRES BONITA SPRING	ST RIDGE DRIVE	Title: Name: Address: City-St-Zi	·	) Change ()Addition	
Title: Name: Address: City-St-Zip:	TD () I MARMO, RON 22500 BAYCRES BONITA SPRING		Title: Name: Address: City-St-Zi	`	) Change ()Addition	
Title: Name: Address: City-St-Zip:	D () I FELDMAN, ANN 22552 BAYCRES BONITA SPRING		Title: Name: Address: City-St-Zi	·	) Change ()Addition	
Title: Name: Address: City-St-Zip:	D () I NELSON, BILL 22512 BAYCRES BONITA SPRING		Title: Name: Address: City-St-Zi		) Change ()Addition	
Title: Name: Address: City-St-Zip:	SWAIN, PAUL	Delete ST RIDGE DRIVE S, FL 34135	Title: Name: Address: City-St-Zi	NELSON, BIL 22512 BAYCF	X) Change ()Addition L REST RIDGE DRIVE NGS, FL 34135	

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: CHARLES POPPER PD 01/23/2009