


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 14, 2008 8:00 am**  
**Secretary of State**

04-14-2008 90056 044 \*\*\*\*61.25

**DOCUMENT # N04000008493**

1. Entity Name  
**BAY POINTE ASSOCIATION, INC.**



Principal Place of Business  
**PO BOX 31  
 BRADENTON, FL 34206**

Mailing Address  
**PO BOX 31  
 BRADENTON, FL 34206**

2. Principal Place of Business - No P.O. Box #  
**2715 Terra Ceia Bay Blvd**

3. Mailing Address  
**4301 32nd St. W.**

Suite, Apt. #, etc.  
**Ste A 20**

City & State  
**Palmetto, FL**


City & State  
**Bradenton, FL**

Zip  
**34221**

Country  
**United States**

Zip  
**34205**

Country  
**United States**



04072008 Chg-NP CR2E037 (12/06)

4. FEI Number  
**11-3749768**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**DEITRICH, DAVID K  
 C&S CANDA MGMT  
 4301 32ND ST. W #A-20  
 BRADENTON, FL 34205**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$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	PD	<input checked="" type="checkbox"/> Delete	TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PRESTON, WHITING H		NAME	Roger Weaver	
STREET ADDRESS	1320 33RD ST W		STREET ADDRESS	2715 Terra Ceia Bay Blvd	
CITY-ST-ZIP	PALMETTO, FL 34221		CITY-ST-ZIP	Palmetto, FL 34221	
TITLE	VP	<input checked="" type="checkbox"/> Delete	TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ESCALANTE, CARLOS C II		NAME	Joe Varady	
STREET ADDRESS	1320 33RD ST W		STREET ADDRESS	2715 Terra Ceia Bay Blvd	
CITY-ST-ZIP	PALMETTO, FL 34221		CITY-ST-ZIP	Palmetto, FL 34221	
TITLE		<input type="checkbox"/> Delete	TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Shari Guzik	
STREET ADDRESS			STREET ADDRESS	2715 Terra Ceia Bay Blvd	
CITY-ST-ZIP			CITY-ST-ZIP	Palmetto, FL 34221	
TITLE		<input type="checkbox"/> Delete	TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Whiting Preston	
STREET ADDRESS			STREET ADDRESS	2715 Terra Ceia Bay Blvd	
CITY-ST-ZIP			CITY-ST-ZIP	Palmetto, FL 34221	
TITLE		<input type="checkbox"/> Delete	TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Dan Deegenhart	
STREET ADDRESS			STREET ADDRESS	2715 Terra Ceia Bay Blvd	
CITY-ST-ZIP			CITY-ST-ZIP	Palmetto, FL 34221	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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:** Joseph Varady **Joseph VARADY** Apr 8, 2008 941-729-1680

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #