

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009091

FILED
Mar 26, 2009
Secretary of State

Entity Name: BAY HAVEN AT COCO BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

12734 KENWOOD LANE
STE 49
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

12734 KENWOOD LANE
STE 49
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 20-1650889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUDLAND, MARK
12734 KENWOOD LN STE 49
FORT MYERS, FL 33907 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: P () Delete
Name: SHELLY, PHIL
Address: 12277 COCO HAMMOCK WAY #201
City-St-Zip: FORT MYERS, FL 33908

Title: VP () Delete
Name: LOKUTA, LARRY
Address: 3400 COUNTRY CT
City-St-Zip: TRENTON, MI 48183

Title: T () Delete
Name: SCOVIN, HARRY
Address: 16237 COCO HAMMOCK WAY #102
City-St-Zip: FORT MYERS, FL 33908

Title: ASM () Delete
Name: RUDLAND, MARK
Address: 12734 KENWOOD LN STE 49
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T/S (X) Change () Addition
Name: USTRUCK, RONALD
Address: 5993 LONG POINT DR.
City-St-Zip: DAVISBURG, MI 48350

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: PHIL SHELLY

P

03/26/2009

Electronic Signature of Signing Officer or Director

Date