

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04244

FILED  
Mar 09, 2011  
Secretary of State

**Entity Name:** BAYPORT WEST HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

10801 VENICE CIRCLE  
TAMPA, FL 33635

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 273708  
TAMPA, FL 33688

**New Mailing Address:**

FEI Number: 59-2446384

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THE TROWBRIDGE COMPANY, INC.  
3421 VALLEY RANCH DR  
LUTZ, FL 33549 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: PD  
Name: BROWN, LAWRENCE C  
Address: 7055 SILVERMILL DRIVE  
City-St-Zip: TAMPA, FL 33635

Title: SD  
Name: TENUTA, KAY  
Address: 7031 SILVERMILL DR  
City-St-Zip: TAMPA, FL 33635

Title: TD  
Name: BORGSTROM, RICHARD O  
Address: 7051 SILVERMILL DRIVE  
City-St-Zip: TAMPA, FL 33635

Title: VD  
Name: WILLIAMS, SUE ELLEN  
Address: 6907 SILVERMILL DR  
City-St-Zip: TAMPA, FL 33635

Title: D  
Name: BARNES, ELAINE  
Address: 7053 SILVERMILL DRIVE  
City-St-Zip: TAMPA, FL 33635

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: LAWRENCE BROWN

PD

03/09/2011

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

\_\_\_\_\_  
Date