

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002936

FILED
Apr 06, 2008
Secretary of State

Entity Name: BAYTOP SUBDIVISION, 1ST ADDITION HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

3471 GOLDENWOOD WAY
PENSACOLA, FL 32504

New Principal Place of Business:

6486 ROSAFLOA LN
PENSACOLA, FL 32504

Current Mailing Address:

3471 GOLDENWOOD WAY
PENSACOLA, FL 32504

New Mailing Address:

6486 ROSAFLOA LN
PENSACOLA, FL 32504

FEI Number: 51-0559147

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTHEWS, EDESEL F JR
308 SOUTH JEFFERSON STREET
PENSACOLA, FL 32502 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: STD () Delete
Name: HOLLEY, JANET
Address: 3471 GOLDENWOOD WAY
City-St-Zip: PENSACOLA, FL 32504

Title: PD () Delete
Name: WHIBBS, JOHN P
Address: 6496A SCENIC HWY
City-St-Zip: PENSACOLA, FL 32503

Title: D () Delete
Name: WHIBBS, MARK
Address: 6496C SCENIC HWY
City-St-Zip: PENSACOLA, FL 32504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: HOLLEY, JANET
Address: 6486 ROSAFLOA LN.
City-St-Zip: PENSACOLA, FL 32504

Title: PD (X) Change () Addition
Name: WHIBBS, JOHN P
Address: 6496 ROSAFLOA LN
City-St-Zip: PENSACOLA, FL 32504

Title: D (X) Change () Addition
Name: WHIBBS, MARK
Address: ROSAFLOA LN
City-St-Zip: PENSACOLA, FL 32504

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: JANET HOLLEY

SEC

04/06/2008

Electronic Signature of Signing Officer or Director

Date