

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000002936

**FILED**  
**Jan 09, 2011**  
**Secretary of State**

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

**Current Principal Place of Business:**

6486 ROSAFLORA LN  
PENSACOLA, FL 32504

**New Principal Place of Business:**

6478 ROSAFLORA LN  
PENSACOLA, FL 32504

**Current Mailing Address:**

6486 ROSAFLORA LN  
PENSACOLA, FL 32504

**New Mailing Address:**

6478 ROSAFLORA 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  
Name: WHIBBS, ELISA  
Address: 6478 ROSAFLORA LN.  
City-St-Zip: PENSACOLA, FL 32504

Title: PD  
Name: WHIBBS, RACHAEL  
Address: 6496 ROSAFLORA LN  
City-St-Zip: PENSACOLA, FL 32504

Title: D  
Name: WHIBBS, MARK  
Address: 6478 ROSAFLORA LN  
City-St-Zip: PENSACOLA, FL 32504

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:** ELISA G WHIBBS

STD

01/09/2011

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

\_\_\_\_\_  
Date