

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2009
Secretary of State

DOCUMENT# N05000003158

Entity Name: BAKERSFIELD PLACE TOWNHOMES I PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

310 S WESTLAND AVE
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

310 S WESTLAND AVE
#3
TAMPA, FL 33606

New Mailing Address:

FEI Number: 20-4430805 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYTS, ANDREW J JR.
201 N ARMENIA
TAMPA, FL 33609 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: DP () Delete
Name: BOLEK, GAYLE A
Address: 310 S WESTLAND AVE #3
City-St-Zip: TAMPA, FL 33606

Title: DV () Delete
Name: POULOS, JOHN
Address: 310 S WESTLAND AVE #4
City-St-Zip: TAMPA, FL 33606

Title: DS () Delete
Name: GIVENS, RODERICK
Address: 310 S WESTLAND AVE #1
City-St-Zip: TAMPA, FL 33606

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: O () Change (X) Addition
Name: FUREY, MARK
Address: 310 S WESTLAND AVE #2
City-St-Zip: TAMPA, FL 33606

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: GAYLE A BOLEK

DP

01/25/2009

Electronic Signature of Signing Officer or Director

Date