2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2005 8:00 am
Secretary of State
04-04-2005 90064 035 ****61.25

DOCUMENT # N05933

1. Entity Name

BAYMEADOWS PLACE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
9116 CYPRESS GREEN DR. STE 115 JACKSONVILLE FL 32256 US	9116 CYPRESS GREEN DR. STE 115 JACKSONVILLE FL 32256 US

1st MOORE CR2E037 (10/04)

2. Principal Place of Business	3. Mailing Address
9000 Cypress Green Dr.	9000 Cypress Green Dr.
Suite, Apt. #, etc. Suite 107-B	Suite, Apt. #, etc. Suite 107-B
City & State Jax., FL	City & State Jax., FL
Zip 32256 Country Duval	Zip 32256 Country Duval

4. FEI Number 59-2504490 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STARLING, JOHN T.
9116 CYPRESS GREEN DR
STE 115
JACKSONVILLE FL 32256

new address →

7. Name and Address of New Registered Agent

Name John T. Starling

Street Address (P.O. Box Number is Not Acceptable) 9000 Cypress Green Dr Suite 107-B

City Jax FL Zip Code 32256

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD PLEIMAN, THOMAS 9471 BAYMEADOWS RD #307 JACKSONVILLE FL 32256	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP SHARP, JR, BILL 8825 PERIMETER PARK BLVD, #401 JACKSONVILLE FL 32216	☑ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HAINER, GREG 9471 BAYMEADOWS RD, #408 JACKSONVILLE FL 32256	☑ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD GRACE, ROBERT 9471 BAYMEADOWS RD SUITE 407 JACKSONVILLE FL 32256	☐ Delete	TITLE President NAME STREET ADDRESS CITY-ST-ZIP	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Kevin Whithow 9471 Baymeadows Rd. #304 Jax., FL 32256	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Hart, William S. 9471 Baymeadows Rd, # 302 Jax., FL 32256	☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert B. Grace 3/29/05 904/731-3833
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #