2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2006 8:00 am
Secretary of State
04-18-2006 90089 047 ****61.25

DOCUMENT # N05933

1. Entity Name

BAYMEADOWS PLACE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
9000 CYPRESS GREEN DR STE 107-B JACKSONVILLE FL 32256 US	9000 CYPRESS GREEN DR STE 107-B JACKSONVILLE FL 32256 US

2. Principal Place of Business	3. Mailing Address
8641 BAYPINE Rd	8641 BAYPINE Rd
Suite, Apt. #, etc.: Ste 1	Suite, Apt. #, etc.: Suite 1
City & State: Jacksonville, FL	City & State: Jacksonville FL
Zip: 32256 Country: DUVAL	Zip: 32256 Country: DUVAL

000139478

1st MOORE CR2E037 (10/05)

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
9000 CYPRESS GREEN DR
STE 107-B
JACKSONVILLE FL 32256

7. Name and Address of New Registered Agent

Name: T Pleiman

Street Address (P.O. Box Number is Not Acceptable): 9471 BAYMEADOWS Rd # 306

City: JACKSONVILLE 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: Thomas C Pleiman JR — 3/31/06

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, 2006

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	P GRACE, ROBERT 9471 BAYMEADOWS RD SUITE 407 JACKSONVILLE FL 32256	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WHITLOW, KEVIN 9471 BAYMEADOWS RD SUITE 304 JACKSONVILLE FL 32256	☒ Delete	VP JOE TUCKER 9471 BAYMEADOWS Rd #204 JACKSONVILLE, FL 32256	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP HART, WILLIAM S 9471 BAYMEADOWS RD SUITE 302 JACKSONVILLE FL 32256	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Thomas C Pleiman JR — 3/31/06 — 4485005