

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90072 006 ****61.25

DOCUMENT # N05933	
1. Entity Name BAYMEADOWS PLACE CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 8641 BAYPINE RD STE 1 JACKSONVILLE, FL 32256 US	Mailing Address 8641 BAYPINE RD STE 1 JACKSONVILLE, FL 32256 US
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20000111

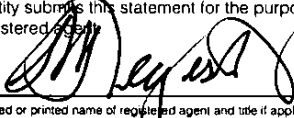


2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01112007 Chg-NP CR2E037 (12/06)

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		7. Name and Address of New Registered Agent
PLEIMON, T 9471 BAY MEADOWS RD, 308 JACKSONVILLE, FL 32256		Name Property Services Inc Street Address (P.O. Box Number is Not Acceptable) 8641 Baypine Rd Suite 1 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  **S.W. Registrar Jr/CEO 3/27/07**

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

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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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	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GRACE, ROBERT 9471 BAYMEADOWS RD SUITE 407 JACKSONVILLE, FL 32256 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TUCKER, JOE 9471 BAY MEADOWS RD, # 204 JACKSONVILLE, FL 32256 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HART, WILLIAM S 9471 BAYMEADOWS RD SUITE 302 JACKSONVILLE, FL 32256 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  **Agent For Baymeadows Place** **3-27-07** **9047319500 EXT 403**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

DAVID W. FORET SR.