

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008834

FILED
Jan 15, 2008
Secretary of State

Entity Name: BUNGALOW BAY ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

328 SHORE DRIVE
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

328 SHORE DRIVE
OLDSMAR, FL 34677

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIANFRONE, JOSEPH R
1964 BAYSHORE BOULEVARD
DUNEDIN, FL 34698 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: D () Delete
Name: NORMANDEAU, SARA
Address: 328 SHORE DRIVE
City-St-Zip: OLDSMAR, FL 34677

Title: D () Delete
Name: NORMANDEAU, MICHAEL
Address: 328 SHORE DRIVE
City-St-Zip: OLDSMAR, FL 34677

Title: D () Delete
Name: NORMANDEAU, DONALD
Address: 4907 PLANTATION DRIVE
City-St-Zip: TAMPA, FL 33615

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:

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: MICHAEL A. NORMANDEAU

D

01/15/2008

Electronic Signature of Signing Officer or Director

Date