

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008997

FILED  
Apr 18, 2008  
Secretary of State

**Entity Name:** BOUGAINVILLEA BAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2033 MAIN STREET  
SUITE 600  
SARASOTA, FL 34237

**New Principal Place of Business:**

**Current Mailing Address:**

2033 MAIN STREET  
SUITE 600  
SARASOTA, FL 34237

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MESSICK, ROBERT E  
2033 MAIN STREET  
SUITE 600  
SARASOTA, FL 34237 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: PTD ( ) Delete  
Name: GIDDINGS, MARVIN M.D.  
Address: POST OFFICE BOX 10229  
City-St-Zip: POMPANO BEACH, FL 33061

Title: VSD ( ) Delete  
Name: GIDDINGS, JANE H  
Address: POST OFFICE BOX 10229  
City-St-Zip: POMPANO BEACH, FL 33061

Title: D ( ) Delete  
Name: MILLER, CELIA  
Address: POST OFFICE BOX 10229  
City-St-Zip: POMPANO BEACH, FL 33061

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTD (X) Change ( ) Addition  
Name: GIDDINGS, MARVIN M.D.  
Address: 4050 NE 27TH TERRACE  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: VSD (X) Change ( ) Addition  
Name: GIDDINGS, JANE H  
Address: 4050 NE 27TH TERRACEPOST OFFICE BOX 10229  
City-St-Zip: LIGHTHOUSE PT, FL 33064

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: MARVIN A GIDDINGS

PTD

04/18/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date