

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010900

FILED
Jul 31, 2008
Secretary of State

Entity Name: BAHAMA VILLAGE BUISNESS ASS. INC.

Current Principal Place of Business:

828 WHITE ST.
SUITE 3
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

828 WHITE ST.
SUITE 3
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 65-1016676 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ZAHAV, JONATAN
828 WHITE ST.
SUITE 3
KEY WEST, FL 33040 US

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: PD () Delete
Name: ZAHAV, JONATAN
Address: 828 WHITE ST. SUITE 3
City-St-Zip: KEY WEST, FL 33040

Title: VPD () Delete
Name: WALTON, RUPERT
Address: 733 WHITEHEAD ST. APT. 2
City-St-Zip: KEY WEST, FL 33040

Title: T,D () Delete
Name: HOBcraft, ROBERT
Address: 807 CATHERINE ST.
City-St-Zip: KEY WEST, FL 33040

Title: D,S () Delete
Name: STAFFORD, VERONICA
Address: PO BOX 122
City-St-Zip: KEY WEST, FL 33040

Title: D () Delete
Name: SCHROEDER, JOSEPH J
Address: 1013 TRUMAN AVE.
City-St-Zip: KEY WEST, FL 33040

Title: D () Delete
Name: SWEETING SOMERSALL, MARCIA
Address: 623 PETRONIA ST.
City-St-Zip: KEY WEST, FL 33040

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:

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: JON ZAHAV

PD

07/31/2008

Electronic Signature of Signing Officer or Director

Date