

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N07000001492

1. Entity Name
BASS HARBOUR CONDOMINIUM ASSOCIATION, INC.



FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 DEC 29 PM 3:54
200215592712
12/28/11--01039--009 **61.25



Principal Place of Business
1360 SOUTH DIXIE HIGHWAY
SUITE 100
CORAL GABLES, FL 33146

Mailing Address
1360 SOUTH DIXIE HIGHWAY
SUITE 100
CORAL GABLES, FL 33146

2. Principal Place of Business - No P.O. Box #
5210 Paylor Lane

3. Mailing Address
5210 Paylor Lane

Suite, Apt. #, etc.

12052011 Chg-NP CR2E037 (11/08)

City & State
Sarasota, FL

City & State
Sarasota, FL

Zip
34240

Country
USA

Zip
34240

Country
USA

4. FEI Number
APPLIED FOR

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

COYA, JENNIFER A ESQ
1360 SOUTH DIXIE HIGHWAY
SUITE 100
CORAL GABLES, FL 33146

7. Name and Address of New Registered Agent

Name
Edward L. Wotitzky, Esq

Street Address (P.O. Box Number is Not Acceptable)

223 Taylor Street

City
Punta Gorda, FL

Zip Code
33950

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 **Edward L. Wotitzky** **12/9/2011**

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 September 23, 2011

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	PD NICHOLAS, CARTER 9990 RICHMOND, 400 SOUTH HOUSTON, TX 77042 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Michael T. Emmons 5210 Paylor Lane Sarasota, FL 34240 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST NICHOLAS, CARTER 9990 RICHMOND, 400 SOUTH HOUSTON, TX 77042 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Steven S. Guy 5210 Poplar Lane, Sarasota, FL 34240 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Jeffrey A. Switzer 5210 Paylor Lane Sarasota, FL 34240 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: **Jeffrey A. Switzer** **12/15/2011**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #