2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13033

FILED Apr 01, 2009 Secretary of State

Entity Name: BARCLAY BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4727 SW 13 AVE

CAPE CORAL, FL 33914 US

Current Mailing Address: New Mailing Address:

P.O. BOX 100831

CAPE CORAL, FL 33910 US

FEI Number: 59-2628458 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TEAGUE, GEORGE PROFESSIONALLY YOURS, INC 2503 DEL PRADO BLVD #500 CAPE CORAL, FL 33904 US TEAGUE, GEORGE PROFESSIONAL REALTY CONSULTANTS 3501 DEL PRADO BLVD #100 CAPE CORAL, FL 33904 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: 04/01/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: D () Delete Title: D (X) Change () Addition

 Name:
 JOECKEN, MARILYN
 Name:
 JOECKEN, MARILYN

 Address:
 2503 DEL PRADO BLVD; STE 500
 Address:
 3501 DEL PRADO BLVD; STE 100

 City-St-Zip:
 CAPE CORAL, FL 33904 US
 City-St-Zip:
 CAPE CORAL, FL 33904 US

Title: TD () Delete Title: TD (X) Change () Addition Name: RUCINSKI, JENNIFER Name: RUCINSKI, JENNIFER

Address: 2503 DEL PRADO BLVD; STE 500 Address: 3501 DEL PRADO BLVD; STE 100 City-St-Zip: CAPE CORAL, FL 33904 US City-St-Zip: CAPE CORAL, FL 33904 US

 $\label{eq:title:P} {\sf Title:} \qquad {\sf P} \qquad {\sf ()} \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf P} \qquad {\sf (X)} \ {\sf Change} \ {\sf ()} \ {\sf Addition}$

 Name:
 DELUCA, THERESA
 Name:
 DELUCA, THERESA

 Address:
 2503 DEL PRADO BLVD; STE 500
 Address:
 3501 DEL PRADO BLVD; STE 100

 City-St-Zip:
 CAPE CORAL, FL 33904 US
 City-St-Zip:
 CAPE CORAL, FL 33904 US

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: GEORGE TEAGUE AGNT 04/01/2009