

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14985

**FILED**  
**Jan 19, 2011**  
**Secretary of State**

**Entity Name:** BAY PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3233 EAST BAY DRIVE  
SUITE 103  
LARGO, FL 337711900 US

**New Principal Place of Business:**

**Current Mailing Address:**

3233 EAST BAY DRIVE  
SUITE 103  
LARGO, FL 337711900 US

**New Mailing Address:**

**FEI Number:** 59-2800179

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LUCZAK, DAVID A  
3233 EAST BAY DRIVE  
SUITE 103  
LARGO, FL 337711900 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: VSD  
Name: ELLIS, SUSAN G  
Address: 3233 EAST BAY DRIVE, SUITE 100  
City-St-Zip: LARGO, FL 33771 US

Title: VTD  
Name: ELLIS, DAVID R  
Address: 3233 EAST BAY DRIVE, SUITE 101  
City-St-Zip: LARGO, FL 33771 US

Title: PD  
Name: LUCZAK, DAVID A  
Address: 3233 EAST BAY DRIVE, SUITE 103  
City-St-Zip: LARGO, FL 33771 US

Title: VD  
Name: HAYES, ELIZABETH F  
Address: 1988 GULF TO BAY BLVD.  
City-St-Zip: CLEARWATER, FL 33765 US

I hereby 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 all other like empowered.

SIGNATURE: DAVID A. LUCZAK

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01/19/2011

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

\_\_\_\_\_  
Date