2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23210

Current Principal Place of Business:

FILED Apr 29, 2005 Secretary of State

Entity Name: BECKETT BAY HOMEOWNERS ASSOCIATION, INC.

9228 CALLE ALTA CT 9228 CALLE ALTA CT NEW PORT RICHEY, FL 34655			755 BECKETT WAY TARPON SPRINGS, FL 34689		
Current Mailing Address:			New Mailing Address:		
PREMIERE MANAGEMENT SERVICES, INC. P.O. BOX 2593 TARPON SPRINGS, FL 346882593		P.O. BO	PREMIERE MANAGEMENT SERVICES, INC. P.O. BOX 143 NEW PORT RICHEY, FL 34673		
FEI Number: 59-2891118	FEI Number Applied For ()	FEI Number Not Ap	oplicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
SPROWLS, JOSEPH D C/O JOSEPH SPROWLS 9228 CALLE ALTA CT NEW PORT RICHEY, FL 34655 US		C/O JOS 11922 TE	SPROWLS, JOSEPH D C/O JOSEPH SPROWLS 11922 TEE TIME CIRCLE NEW PORT RICHEY, FL 34654 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:			04/29/2005		
Electronic Signature of Registered Agent		nt		Date	
OFFICERS AND DIRECTORS:		ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: VPD ()D	Pelete	Title:	D ()	() Change () Addition	

New Principal Place of Business:

ROGALA, TOM ROGALA, TOM Name: Name: Address: 1479 RIDGE SHORE DR. Address: 1479 RIDGE SHORE DR. City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: TARPON SPRINGS, FL 34689 Title: SD () Delete Title: () Change () Addition Name: HYNES, KATHY Name: Address: 1514 RIDGE SHORE DR. Address: City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: Title: PD () Delete Title: (X) Change () Addition CORTESE, PAULINE CORTESE, PAULINE Name: Name: 730 BAYSIDE DR 730 BAYSIDE DR Address: Address: City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: TARPON SPRINGS, FL 34689 Title: () Delete Title: PD (X) Change () Addition JAMES, PAINTER Name: Name: JAMES, PAINTER 1480 CLUB DRIVE 1480 CLUB DRIVE Address: Address: TARPON SPRINGS, FL 34689 City-St-Zip: City-St-Zip: TARPON SPRINGS, FL 34689 VPD Title: Title: () Delete () Change () Addition DEBELL, STEVE Name: Name: 635 BAYSIDE DR. Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: JAMES PAINTER PD 04/29/2005

TARPON SPRINGS, FL 34689

City-St-Zip: