

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26381

FILED  
Feb 04, 2007  
Secretary of State

**Entity Name:** BAYSHORE BEAUTIFUL HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2931 W ALLINE AVE  
TAMPA, FL 33611 US

**New Principal Place of Business:**

**Current Mailing Address:**

2931 W ALLINE AVE  
TAMPA, FL 33611 US

**New Mailing Address:**

**FEI Number:** 59-2894464

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CUNNIFF, LYNN TREASUR  
2931 W ALLINE AVE  
TAMPA, FL 33611 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: TD ( ) Delete  
Name: CUNNIFF, LYNN TREAS  
Address: 2931 W ALLINE  
City-St-Zip: TAMPA, FL 33611 US

Title: PD ( ) Delete  
Name: LYON, SUE PRES  
Address: 3233 FAIR OAKS  
City-St-Zip: TAMPA, FL 33611 US

Title: S ( ) Delete  
Name: ALLMAND, PATRICIA SECY  
Address: 2935 ALLINE AVE  
City-St-Zip: TAMPA, FL 33611 US

Title: 1VP ( ) Delete  
Name: LEWIS, PATRICIA 1ST VP  
Address: 2901 ALLINE AVE  
City-St-Zip: TAMPA, FL 33611 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: HANDLEY, PATRICIA PRES  
Address: 2901 W ALLINE AVE  
City-St-Zip: TAMPA, FL 33611 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: 1VP (X) Change ( ) Addition  
Name: LYON, SUSAN 1ST VP  
Address: 3233 W FAIR OAKS AVE  
City-St-Zip: TAMPA, FL 33611 US

I hereby certify that the information supplied with this filing does not qualify for the 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: LYNN CUNNIFF

TD

02/04/2007

Electronic Signature of Signing Officer or Director

Date