

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26556

FILED
Apr 29, 2008
Secretary of State

Entity Name: BAY COLONY COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

8700 BAY COLONY DRIVE
NAPLES, FL 34108 US

New Principal Place of Business:

Current Mailing Address:

8700 BAY COLONY DRIVE
NAPLES, FL 34108 US

New Mailing Address:

FEI Number: 65-0259394

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, MICHAEL A
C/O BAY COLONY COMMUNITY ASSOCIATION INC
8700 BAY COLONY DR
NAPLES, FL 34108 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: P () Delete
Name: SARNI, VINCENT
Address: 8990 BAY COLONY DRIVE
City-St-Zip: NAPLES, FL 34108

Title: VP () Delete
Name: MERKEL, PETER
Address: 8960 BAY COLONY DRIVE
City-St-Zip: NAPLES, FL 34108

Title: T () Delete
Name: ROSENBERG, KIM
Address: 8665 BAY COLONY DR
City-St-Zip: NAPLES, FL 34108

Title: S () Delete
Name: SCHOENWETTER, JIM
Address: 215 POINT SALERNO
City-St-Zip: NAPLES, FL 34108

Title: D () Delete
Name: MCDONALD, ROBERT
Address: 8231 BAY COLONY DRIVE
City-St-Zip: NAPLES, FL 34108

Title: D () Delete
Name: NEAVOLLS, GERALD
Address: 8930 BAY COLONY DRIVE
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: SCANLON, EDWARD
Address: 8473 BAY COLONY DRIVE
City-St-Zip: NAPLES, FL 34108

Title: D (X) Change () Addition
Name: DANFORTH, DOUGLAS
Address: 8787 BAY COLONY DRIVE
City-St-Zip: NAPLES, FL 34108

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: MICHAEL NELSON

D

04/29/2008

Electronic Signature of Signing Officer or Director

Date