
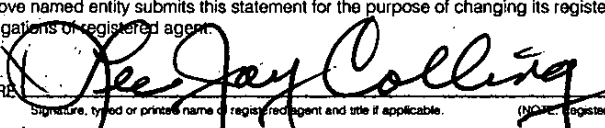



2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2005 8:00 am
Secretary of State

03-03-2005 90170 025 ****61.25

DOCUMENT # N26990					
1. Entity Name BAYSHORE MOBILE HOME VILLAGE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 15738 BREEZY POINT DR. FORT MYERS, FL 33917 US			Mailing Address 15738 BREEZY POINT DR. FORT MYERS, FL 33917 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		02202005 Chg-NP CR2E037 (10/03)	
Zip		Country		4. FEI Number 59-2840940	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
JANSSEN, ROBERT L 15738 BREEZY POINT DR. FORT MYERS, FL 33917			Name LEE JAY COLLING Street Address (P.O. Box Number is Not Acceptable) LEE JAY COLLING & ASSOC P.A. 682 Maitland Ave, SUITE 2 City ALTAMONTE SPRINGS, FL Zip Code 32701		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE:  <small>Signature, typed or printed name of registered agent and title if applicable. (NONE: Registered Agent signature required when reinstating)</small>			DATE: 2-25-05		
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD AVERY, BOB <input checked="" type="checkbox"/> Delete 15825 SHELL CREST DR. FORT MYERS, FL 33917		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ADAMS, EARL <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 15935 BLUE SKIES DR. N Fort Myers, FL 33917	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JANSSEN, ROBERT <input type="checkbox"/> Delete 15738 BREEZY POINT DR. N FORT-MYERS, FL-33917		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WORMAN, JIM <input type="checkbox"/> Delete 15962 BLUE SKIES DR. NORTH FORT MYERS, FL 33917		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BOWEN, GLORIA <input type="checkbox"/> Delete 15861 SHELL CREST DR. N FT MEYERS, FL 33917		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TRESSEL, CHRISTINE <input type="checkbox"/> Delete 15913 SANDY POINT DR. N FORT MYERS, FL 33917		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CYR, BOB <input type="checkbox"/> Delete 15969 BLUE SKIES DR. N. FT. MYERS, FL 33917		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			Date: 2-21-05 Daytime Phone #: 239-731-5794		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

ATTACHMENT

ADDITION

Title: D
Name: Martin, Carol
Street Address: 15841 Shell Crest Drive
City, St. Zip: North Fort Myers, FL 33917

~~40025033
N26990~~

DELETE

Title: D
Name: Webb, Jack
Street Address: 15882 Lake Pointe Court
City, St. Zip: North Fort Myers, FL 33917