


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 03, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # N30813**  
 1. Entity Name  
**BAYBROOK HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business <b>P O BOX 905 OLDSMAR, FL 34677</b>	Mailing Address <b>P O BOX 905 OLDSMAR, FL 34677</b>
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01292006 No Chg-NP CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3001984</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**GIMBERT, JACK H  
 11310 PALM PASTURE DR  
 TAMPA, FL 33635**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when certifying)  
 Signature, typed or printed name of registered agent and title if applicable. DATE

**Filing Fee is \$61.28  
 Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDO BERTAN, BRUCE 11328 PALM PASTURE SR TAMPA, FL 33635
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PECORARO, TONY 11313 PALM PATURE DRIVE TAMPA, FL 33635
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GIMBERT, JACK 11310 PALM PASTURE DR TAMPA, FL
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**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** JACK H. GIMBERT **JACK H. GIMBERT** 1/30/06 (813) 855-378  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #