

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34440

FILED  
Jan 23, 2012  
Secretary of State

**Entity Name:** SEA PINES II AT BAY FOREST CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

15210-1 MAJORCA BAY DRIVE  
NAPLES, FL 34110 US

**New Principal Place of Business:**

**Current Mailing Address:**

15212 MAJORCA BAY DRIVE  
NAPLES, FL 34110 US

**New Mailing Address:**

15197-1 MAJORCA BAY DRIVE  
NAPLES, FL 34110 US

**FEI Number:** 65-0246291

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHALTAS, CRYSTAL R  
15197-1 MAJORCA BAY DR  
NAPLES, FL 34110 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: PD  
Name: CHALTAS, CRYSTAL R  
Address: 15197-1 MAJORCA BAY DRIVE  
City-St-Zip: NAPLES, FL 34110 US

Title: VPD  
Name: HUTNICK, JOHN  
Address: 15210-1 MAJORCA BAY DRIVE  
City-St-Zip: NAPLES, FL 34110 US

Title: TD  
Name: CARLSON, EDWARD  
Address: 15150 MAJORCA BAY DRIVE  
City-St-Zip: NAPLES, FL 34110 US

Title: D  
Name: WATKINS, ROBERT  
Address: 15174-1 MAJORCA BAY DRIVE  
City-St-Zip: NAPLES, FL 34110 US

Title: SD  
Name: PINO, PAT  
Address: 15174-2 MAJORCA BAY DRIVE  
City-St-Zip: NAPLES, FL 34110 US

I hereby 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 all other like empowered.

SIGNATURE: CRYSTAL RAWLS CHALTAS

PRES

01/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date