2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2009
Secretary of State

DOCUMENT# N37723

Entity Name: BAYONET POINT MEDICAL PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O SEABOARD ARBORS MGMT
2189 CLEVELAND ST., SUITE 225
CLEARWATER, FL 33765 US

New Principal Place of Business:

Current Mailing Address:

C/O SEABOARD ARBORS MGMT
2189 CLEVELAND ST., SUITE 225
CLEARWATER, FL 33765 US

New Mailing Address:

FEI Number: 59-3015457 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEIGHTON, LEONARD A
2189 CLEVELAND STREET
STE 225
CLEARWATER, FL 33765 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 ( ) Delete
Name: CHANG, DR.
Address: 14100 FIVAY RD., 100
City-St-Zip: HUDSON, FL 34667

Title: VPD (X) Delete
Name: KUMAR, K.S. DR.
Address: 5802 ST. RD. 54
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: TD ( ) Delete
Name: MASSENGILL, LEIGH
Address: 14100 FIVAY RD
City-St-Zip: HUDSON, FL 34667

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:

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: LEIGH MASSENGILL T 01/12/2009
Electronic Signature of Signing Officer or Director — Date