

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38723

FILED
Apr 11, 2006
Secretary of State

Entity Name: BAHIA VISTA, UNIT III, CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6083 & 6085 BAHIA DEL MAR CIR
SAINT PETERSBURG, FL 33715 US

New Principal Place of Business:

Current Mailing Address:

5901 SUN BLVD
STE 200
SAINT PETERSBURG, FL 33715 US

New Mailing Address:

FEI Number: 65-0206729 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RESOURCE PROPERTY MGMT
5901 SUN BLVD
STE 200
SAINT PETERSBURG, FL 33715 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: D () Delete
Name: FRANK, EDWIN
Address: 6085 BAHIA DEL MAR CI #270
City-St-Zip: SAINT PETERSBURG, FL 33715

Title: PD () Delete
Name: JONES, MARTY
Address: 1389 LAURELHURST DR
City-St-Zip: TEMPERANCE, MI 48182

Title: ST () Delete
Name: MCKELLAR, KENNETH
Address: 6085 BAHIA DEL MAR CIRCLE #362
City-St-Zip: ST. PETERSBURG, FL 33715

Title: D () Delete
Name: WULFF, NORMAN
Address: 6085 BAHIA DEL MAR CIRCLE #470
City-St-Zip: ST. PETERSBURG, FL 33715

Title: VP () Delete
Name: DEVANY, MARGE
Address: 6085 BAHIA DEL MAR CIR #169
City-St-Zip: SAINT PETERSBURG, FL 33715

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S/T (X) Change () Addition
Name: LAREGINA, ANTHONY
Address: 6085 BAHIA DEL MAR CIRCLE #157
City-St-Zip: ST. PETERSBURG, FL 33715

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 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: LINDA E. KISER

MGR.

04/11/2006

Electronic Signature of Signing Officer or Director

Date