

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N39358

**FILED**  
**Jan 19, 2011**  
**Secretary of State**

**Entity Name:** BAYHEAD LANDINGS PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

HANCOCK BLUFF ROAD  
DADE CITY, FL 33523 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 478  
SAN ANTONIO, FL 33576 US

**New Mailing Address:**

**FEI Number:** 59-3117405      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

NOYES, ABBY J  
18587 HANCOCK BLUFF RD  
DADE CITY, FL 33523 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: LEE, KIMBALL  
Address: 18012 HANCOCK BLUFF RD.  
City-St-Zip: DADE CITY, FL 33523

Title: VD  
Name: KOLKA, GLORIA  
Address: 29316 INDIAN POND CT.  
City-St-Zip: DADE CITY, FL 33523

Title: VD  
Name: JONES, RICK  
Address: 29340 INDIAN POND CT.  
City-St-Zip: DADE CITY, FL 33523

Title: TR  
Name: NOYES, ABBY J  
Address: 18587 HANCOCK BLUFF RD  
City-St-Zip: DADE CITY, FL 33523

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: ABBY J. NOYES

TR

01/19/2011

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

\_\_\_\_\_  
Date