

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40516

FILED
Sep 14, 2006
Secretary of State

Entity Name: BAYOU HARBOR OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

TIMBER ISLAND RD & BAYOU DR
CARRABELLE, FL 32322

New Principal Place of Business:

Current Mailing Address:

108 AVE B SOUTH
P.O. BOX 473
CARRABELLE, FL 323220473

New Mailing Address:

FEI Number: 59-3140156 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MARXSEN, PAUL
108 AVE B SOUTH
CARRABELLE, FL 323220629 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: TD () Delete
Name: MARXSEN, PAUL
Address: 108 AVE B SOUTH
City-St-Zip: CARRABELLE, FL 32322

Title: D () Delete
Name: KELLY, MEL
Address: 133 TIMBER LN
City-St-Zip: CARRABELLE, FL 32322

Title: D () Delete
Name: THOMPSON, MARTHA
Address: 1594 BAYOU DR
City-St-Zip: CARRABELLE, FL 32322

Title: D () Delete
Name: BURKE, PAT
Address: 1621 BAYOU DR
City-St-Zip: CARRABELLE, FL 32322

Title: D () Delete
Name: KRAWCZUK, CHESTER
Address: 3645 IVY SUITE 100
City-St-Zip: ATLANTA, GA 30342

Title: D () Delete
Name: SCNIDER, DELL
Address: 260 TIMBER ISLAND RD
City-St-Zip: CARRABELLE, FL 32322

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:

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

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

Title: D (X) Change () Addition
Name: SCHNIEDER, DELL
Address: 260 TIMBER ISLAND RD
City-St-Zip: CARRABELLE, FL 32322

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: PAUL MARXSEN

D

09/14/2006

Electronic Signature of Signing Officer or Director

Date