

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43364

FILED  
Mar 20, 2009  
Secretary of State

**Entity Name:** BAYVIEW AT FISHER ISLAND CONDOMINIUM NO. TWO ASSOCIATION, INC.

**Current Principal Place of Business:**

6 FISHER ISLAND DRIVE  
FISHER ISLAND, FL 33109

**New Principal Place of Business:**

**Current Mailing Address:**

6 FISHER ISLAND DRIVE  
FISHER ISLAND, FL 33109

**New Mailing Address:**

**FEI Number:** 65-0272630

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SWIMMER, AARON  
1680 MICHIGAN AVENUE  
SUITE 1014  
MIAMI BEACH, FL 33139 US

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

THE BARTHET FIRM  
200 SOUTH BISCAYNE BOULEVARD  
SUITE 1800  
MIAMI, FL 33131 US

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: PAUL BREITNER

03/20/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HERRON, JANE  
Address: 5342 FISHER ISLAND DRIVE  
City-St-Zip: FISHER ISLAND, FL 33109

Title: S ( ) Delete  
Name: KAHN, ARTHUR  
Address: 5391 FISHER ISLAND DRIVE  
City-St-Zip: FISHER ISLAND, FL 33109

Title: T ( ) Delete  
Name: HALLERAN, ARTHUR  
Address: 5342 FISHER ISLAND DRIVE  
City-St-Zip: FISHER ISLAND, FL 33109

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: HERRON, JANE  
Address: 5342 FISHER ISLAND DRIVE  
City-St-Zip: FISHER ISLAND, FL 33109

Title: T (X) Change ( ) Addition  
Name: KAHN, MARC  
Address: 5391 FISHER ISLAND DRIVE  
City-St-Zip: FISHER ISLAND, FL 33109

Title: S (X) Change ( ) Addition  
Name: HALLERAN, ARTHUR  
Address: 5342 FISHER ISLAND DRIVE  
City-St-Zip: FISHER ISLAND, FL 33109

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: JANE HERRON

P

03/20/2009

Electronic Signature of Signing Officer or Director

Date