2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44438

FILED Mar 27, 2011 Secretary of State

Entity Name: BAYSHORE TERRACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

27 FRIENDSHIP COURT 1203 BROOK WAY

SAFETY HARBOR, FL 34695 SAFETY HARBOR, FL 34695

Current Mailing Address: New Mailing Address:

PO BOX 12

SAFETY HARBOR, FL 34695

FEI Number: 59-3190328 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KUEHLS, NATALIE LOWE, CONNIE 27 FRIENDSHIP COURT 1203 BROOK WAY

SAFETY HARBOR, FL 34695 US SAFETY HARBOR, FL 34695 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: CONNIE M LOWE 03/27/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: PRES

 Name:
 SHRANER, BEV

 Address:
 1200 LAWNSIDE LANE

 City-St-Zip:
 SAFETY HARBOR, FL 34695

Title: VP

Name: SAFER, JUDY Address: 1205 BROOK WAY

City-St-Zip: SAFETY HARBOR, FL 34695

Title: TRES

Name: LOWE, CONNIE Address: 1203 BROOK WAY

City-St-Zip: SAFETY HARBOR, FL 34695

Title: SEC

 Name:
 KUEHLS, NATALIE

 Address:
 27 FRIENDSHIP COURT

 City-St-Zip:
 SAFETY HARBOR, FL 34695

Title: ALT

Name: KUEHLS, MIKE

Address: 27 FRIENDSHIP COURT City-St-Zip: SAFETY HARBOR, FL 34695

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: CONNIE M LOWE TREA 03/27/2011