

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 20, 2006  
Secretary of State**

DOCUMENT# N44624

Entity Name: BAYSIDE OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

10221 EMERALD COAST PKWY W.  
SUITE 23  
MIRAMAR BEACH, FL 32550 US

**New Principal Place of Business:**

**Current Mailing Address:**

10221 EMERALD COAST PKWY W.  
SUITE 23  
MIRAMAR BEACH, FL 32550 US

**New Mailing Address:**

FEI Number: 59-3131017      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GELDER, JAY B  
10221 EMERALD COAST PKWY, SUITE 23  
MIRAMAR BEACH, FL 32550 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 ( ) Delete  
Name: FOSTER, J.J.  
Address: 185 BAYTREE DRIVE  
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: DVP ( ) Delete  
Name: HEINRICH, KAREN  
Address: 153 BONAIRE BLVD.  
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: STD ( ) Delete  
Name: DUBRAY, PAT  
Address: 143 BONAIRE BLVD.  
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: D ( ) Delete  
Name: LAMARCHE, RICK  
Address: 85 BONAIRE BLVD.  
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: D ( ) Delete  
Name: FINCKE, BETH  
Address: 65 BONAIRE BLVD.  
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: D ( ) Delete  
Name: COFFEY, DAN  
Address: 394 HIDEAWAY BAY DRIVE  
City-St-Zip: MIRAMAR BEACH, FL 32550

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

Title: D (X) Change ( ) Addition  
Name: FOSTER, J.J.  
Address: 185 BAYTREE DRIVE  
City-St-Zip: MIRAMAR BEACH, FL 32550

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: DP (X) Change ( ) Addition  
Name: FINCKE, BETH  
Address: 65 BONAIRE BLVD.  
City-St-Zip: MIRAMAR BEACH, FL 32550

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: BETH FINCKE

PD

01/20/2006

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

\_\_\_\_\_  
Date