2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# N46335

Entity Name: BAHIA VISTA, UNIT IV, CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5901 SUN BLVD.
STE 200
ST PETERSBURG, FL 33715 US

New Principal Place of Business:

Current Mailing Address:

5901 SUN BLVD.
STE 200
ST PETERSBURG, FL 33715 US

New Mailing Address:

FEI Number: 65-0321407 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KISER, LINDA E
5901 SUN BLVD STE 200
SAINT PETERSBURG, FL 33715 US

Name and Address of New Registered Agent:

RESOURCE PROPERTY MANAGEMENT
5901 SUN BLVD
SUITE 200
SAINT PETERSBURG, FL 33715 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: LINDA E. KISER, LCAM 04/06/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: ERICKMAN, JAMES
Address: 6093 BAHIA DEL MAR CIR., #276
City-St-Zip: SAINT PETERSBURG, FL 33715

Title: P ( ) Delete
Name: STERNBURG, RUSS
Address: 6093 BAHIA DEL MAR CIR STE 473
City-St-Zip: ST PETERSBURG, FL 33715

Title: SVP ( ) Delete
Name: LOSITO, BUTCH
Address: 6093 BALIA DEL MAR CIR #376
City-St-Zip: SAINT PETERSBURG, FL 33715

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:

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: LINDA E. KISER, LCAM MGR 04/06/2009
Electronic Signature of Signing Officer or Director Date