## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50557

FILED Apr 29, 2008 Secretary of State

Entity Name: BAREFOOT BAY COMMUNITY FUND, INC.

**Current Principal Place of Business: New Principal Place of Business:** 625 BAREFOOT BLVD BAREFOOT BAY, FT 32976 US **Current Mailing Address: New Mailing Address:** P O BOX 779 186 625 BAREFOOT BLVD BAREFOOT BAY, FT 32976 BAREFOOT BAY, FL 32976 US US FEI Number: 59-3139673 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: WESCHLER, EUGENE HERSEY, AROLYN 1023 ROYAL PALM DR 1068 BAREFOOT CIRCLE BAREFOOT BAY, FL 32976 BAREFOOT BAY, FL 32976 US 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: AROLYN HERSEY 04/29/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition O'KEEFE, MARILYN Name: Name: 1201 ARECA DR Address: Address: City-St-Zip: BAREFOOT BAY, FL 32976 City-St-Zip: Title: () Delete Title: () Change () Addition BARNETT, RHODA Name: Name: Address: 817 PARI WINKLE CR. Address: City-St-Zip: BAREFOOT BAY, FL 32976 City-St-Zip: Title: PD () Delete Title: PD (X) Change ( ) Addition AROLYN, HERSEY AROLYN, HERSEY Name: Name: 1068 BAREFOOT BAY 1068 BAREFOOT BAY Address: Address: City-St-Zip: BAREFOOT BAY, FL 32476 City-St-Zip: BAREFOOT BAY, FL 32976 Title: ( ) Delete Title: D (X) Change ( ) Addition Name: CARROLL, LEO F Name: CARROLL, LEO F 916 DOGWOOD DRIVE Address: Address: 916 DOGWOOD DRIVE BAREFOOT BAY, FL City-St-Zip: City-St-Zip: BAREFOOT BAY, FL 32976 Title: () Delete Title: () Change () Addition SNELLBAKER, H J Name: Name: 601 OLEANDER CIRCLE Address: Address: City-St-Zip: BAREFOOT BAY, FL 32976 City-St-Zip: Title: ( ) Delete Title: () Change () Addition PREIKSCHAT, BOB Name: Name: Address: 604 AMARYLLIS DR Address: SEBASTIAN, FL 32976 City-St-Zip: 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: AROLYN HERSEY PRES 04/29/2008