

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51061

FILED
Apr 30, 2007
Secretary of State

Entity Name: BAY AREA BRIDAL ASSOCIATION, INC.

Current Principal Place of Business:

3142 ELKRIDGE DRIVE
HOLIDAY, FL 34691 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1562
DUNEDIN, FL 34697 US

New Mailing Address:

FEI Number: 59-3154314

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASLER, RAYMOND A
3142 ELKRIDGE DRIVE
HOLIDAY, FL 34691 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: P () Delete
Name: CASLER, RAYMOND A
Address: 3142 ELKRIDGE DRIVE
City-St-Zip: HOLIDAY, FL 34691 US

Title: V () Delete
Name: ZIMMERMAN, JUDY
Address: 2116 PINE RIDGE DRIVE
City-St-Zip: CLEARWATER, FL 33763 US

Title: T (X) Delete
Name: SORBIE, JILL
Address: 2394 JONES DRIVE
City-St-Zip: DUNEDIN, FL 34698 US

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: RAYMOND A CASLER

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date