

Bayview at the Township Condominium Association, Inc.

04-17-2008 90161001 *5,818.75
N93000002520

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N93000002520			
1. Entity Name BAYVIEW AT THE TOWNSHIP CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 4131 CORAL TREE CIR. COCONUT CREEK, FL 33073 US		Mailing Address C/O CASTLE GROUP P.O. BOX 559009 FORT LAUDERDALE, FL 33355-9009 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
MCCLOSKEY, D'ANNA & DIETRLE, LLP C/O RONALD D'ANNA, ESQ. 2300 GLADES ROAD EAST TOWER SUITE 400 BOCA RATON, FL 33431		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	FL Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			
TITLE	TD	<input type="checkbox"/> Delete	
NAME	RENNELLA, RAFFAELA		
STREET ADDRESS	4101 CORAL TREE CR # 111		
CITY-ST-ZIP	COCONUT CREEK, FL		
TITLE	D	<input type="checkbox"/> Delete	
NAME	HOCHBERG, ARTHUR		
STREET ADDRESS	4141 CORAL TREE CIRCLE #246		
CITY-ST-ZIP	COCONUT CREEK, FL 33066		
TITLE	VD	<input type="checkbox"/> Delete	
NAME	QUIMET, ROLAND		
STREET ADDRESS	4161 CORAL TREE CR #261		
CITY-ST-ZIP	COCONUT CREEK, FL		
TITLE	PD	<input type="checkbox"/> Delete	
NAME	GREENHOUSE, ARNOLD		
STREET ADDRESS	4101 CORAL TREE CIRCLE #115		
CITY-ST-ZIP	COCONUT CREEK, FL 33073		
TITLE	SD	<input type="checkbox"/> Delete	
NAME	GLICKMAN, GERALDINE		
STREET ADDRESS	4111 CORAL TREE CIRCLE #124		
CITY-ST-ZIP	COCONUT CREEK, FL 33066		
TITLE		<input type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE		<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS	COCONUT CREEK, FL 33073		
CITY-ST-ZIP			
TITLE		<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Geraldine Glickman (Sect)</i>		Date: 3-27-08	Daytime Phone #: 954-984-9683
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #

FILED

08 APR 29 PM 1:04

CLERK OF STATE
TALLAHASSEE, FLORIDA

66007055



02122008 Chg-NP CR2E037 (12/06)

4. FEI Number 65-0394324 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #