

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003419

FILED
Apr 19, 2006
Secretary of State

Entity Name: BAYPOINTE SUBDIVISION HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2809 BAYPOINTE CIRCLE
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

502 N ARMENIA AVE
TAMPA, FL 33609

New Mailing Address:

FEI Number: 59-3198062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOEHLER, KEITH
502 N ARMENIA AVE
TAMPA, FL 33609 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: TD () Delete
Name: KOEHLER, KEITH
Address: 502 ARMENIA AVE
City-St-Zip: TAMPA, FL 33609

Title: SD () Delete
Name: CLARK-STILLIE, CARINA
Address: 502 N ARMENIA AVE
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: LUM, JOHN
Address: 2811 BAYPOINTE CIR
City-St-Zip: TAMPA, FL 33611

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 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: KEITH W KOEHLER

D

04/19/2006

Electronic Signature of Signing Officer or Director

Date