

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003581

FILED  
Jan 03, 2007  
Secretary of State

Entity Name: BAY DRIVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6881 BAY DRIVE  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 402336  
MIAMI, FL 33140

**New Mailing Address:**

FEI Number: 65-0686198      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KNAPP, PHILIP D  
6881 BAY DRIVE #15  
MIAMI BEACH, FL 33141      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/D ( ) Delete  
Name: KNAPP, PHILIP  
Address: 6881 BAY DRIVE #15  
City-St-Zip: MIAMI BEACH, FL 33141

Title: S/D ( ) Delete  
Name: HOO, RICHARD  
Address: 2495 TRAPP AVENUE  
City-St-Zip: MIAMI BEACH, FL 33141

Title: VP/D ( ) Delete  
Name: ARNOLD, DAVID  
Address: 6881 BAY DRIVE #5  
City-St-Zip: MIAMI BEACH, FL 33141

Title: T/D (X) Delete  
Name: CARTER, DONNA  
Address: 6881 BAY DRIVE #1  
City-St-Zip: MIAMI BEACH, FL 33141

Title: D (X) Delete  
Name: CONCAS, PHILLIPPE  
Address: 76 NW 118 STREET  
City-St-Zip: MIAMI, FL 33168

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V/D (X) Change ( ) Addition  
Name: ARNOLD, DAVID  
Address: 2495 TRAPP AVENUE  
City-St-Zip: MIAMI BEACH, FL 33141

Title: ST/D (X) Change ( ) Addition  
Name: CARTER, DONNA  
Address: 6881 BAY DRIVE #1  
City-St-Zip: MIAMI BEACH, FL 33141

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: PHILIP KNAPP

P

01/03/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date