2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001585

FILED Apr 07, 2009 Secretary of State

Entity Name: PALM BAY AT BAYSIDE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

10540 CAPE HATTERAS DR. . 10540 CAPE HATTERAS DR. . TAMPA, FL 336154253 TAMPA, FL 336154253 US

Current Mailing Address: New Mailing Address:

10540 CAPE HATTERAS DR. . 10540 CAPE HATTERAS DR. . TAMPA, FL 336154253 TAMPA, FL 336154253 US

FEI Number: 65-0567323 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:

CUTTS-STICKELS, TAMARA FIEBE, JOANNE K MRS 10612 HATTERAS DRIVE 10708 CAPE HATTERAS DR. TAMPA, FL 33615 TAMPA, FL 33615

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: JOANNE K. FIEBE 04/07/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PRES () Delete (X) Change () Addition CUTTS-STICKELS, TAMARA Name: FIFRE JOANNE K Name:

10708 CAPE HATTERAS DR Address: 10612 HATTERAS DRIVE Address: City-St-Zip: TAMPA, FL 33615 City-St-Zip: TAMPA, FL 33615

Title: () Delete Title: VΡ (X) Change () Addition Name:

ROARK, LINDA Name: CRALL, ADAM Address: 5907 HATTERAS PALM WAY Address: 5803 CAY COVE CT. City-St-Zip: TAMPA, FL 33615 City-St-Zip: TAMPA, FL 33615

Title: TREA () Delete Title: **TREA** (X) Change () Addition MURPHY, JULIE MILLER, MARIANNE Name: Name:

5901 HATTERAS PALM WAY Address: Address: 10622 CAPE HATTERAS DRIVE

City-St-Zip: TAMPA, FL 33615 City-St-Zip: TAMPA, FL 33615

Title: SEC () Delete Title: SEC (X) Change () Addition

Name: FIEBE, JOANNE Name: ROARK, LINDA Address: 10612 HATTERAS PALM WAY Address: 5907 HATTERAS PALM WAY

City-St-Zip: TAMPA,, FL 33615 City-St-Zip: TAMPA,, FL 33615

Title: () Delete Title: () Change () Addition

RUTH, STEPHEN Name: Name: 5806 HATTERAS PALM WAY Address: Address: City-St-Zip: TAMPA, FL 33615 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: JOANNE K. FIEBE **PRES** 04/07/2009