


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90078 026 ****61.25

DOCUMENT # N94000003735	
1. Entity Name BAYOU POINTE HOMEOWNERS ASSOCIATION, INC.	

Principal Place of Business 8340 73RD CT PINELLAS PARK FL 33781 US	Mailing Address 8300 73RD CT PINELLAS PARK FL 33781 US
--	--



MOORE CR2E037 (11/03)

2. Principal Place of Business 8201 73RD CT Suite, Apt. #, etc. PINELLAS PARK FL City & State 33781 Zip Country US	3. Mailing Address 8200 73RD CT Suite, Apt. #, etc. PINELLAS PARK FL City & State 33781 Zip Country US
--	--

4. FEI Number 59-3257245	Applied For <input type="checkbox"/>
	Not Applicable <input checked="" type="checkbox"/>

6. Name and Address of Current Registered Agent FARRELL, ROBERT 8340 73RD CT PINELLAS PARK FL 33781	7. Name and Address of New Registered Agent Name Lee York Street Address (P.O. Box Number is Not Acceptable) 8201 73RD CT City PINELLAS PARK FL Zip Code 33781
---	--

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 *Lee York* DATE 4/20/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT WHITMILL, RENEE 8300 73RD CT PINELLAS PARK FL 33781 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP YORK, LEE 8201 73RD CT PINELLAS PARK FL 33781 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FARRELL, ROBERT 8340 73RD CT PINELLAS PARK FL 33781 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT CARPENTER, JIM 8200 73RD CT PINELLAS PARK FL 33781 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPF PETTY, GLORIA 8221 73RD CT PINELLAS PARK FL 33781 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Lee York* DATE 4/20/04 727 544-1312

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