2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003922

HAYES, RICHARD

TAMPA, FL 33615

5909 BAYSIDE KEY DR

Name: Address:

City-St-Zip:

Apr 17, 2008 Secretary of State

Entity Name: BAYSIDE KEY HOMEOWNERS ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 11902 RACE TRACK ROAD 1799-B NORTH BELCHER ROAD TAMPA, FL 33626 CLEARWATER, FL 33765 **Current Mailing Address: New Mailing Address:** 11902 RACE TRACK ROAD P.O. BOX 14357 TAMPA, FL 33626 CLEARWATER, FL 33766 FEI Number: 59-3280459 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THE PROPERTY GROUP OF CENTRAL FLORIDA AMERI-TECH REALTY INC 11902 RACE TRACK ROAD 1799-B NORTH BELCHER ROAD 2180 WEST STATE ROAD 434, SUITE 5000 CLEARWATER, FL 33765 TAMPA, FL 33626 US 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: MICHAEL G PEREZ, PRESIDENT 04/17/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MUELLER, KAYLEEN Name: Name: 12808 TAR FLOWER DRIVE Address: Address: City-St-Zip: TAMPA, FL 33626 City-St-Zip: Title: DS () Delete Title: () Change () Addition Name: LISA, MOORE Name: Address: 6351 BAYSIDE KEY DR Address: City-St-Zip: TAMPA, FL 33615 City-St-Zip: Title: DVT () Delete Title: () Change () Addition

Name:

Address:

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: KAYLEEN MUELLER DP 04/17/2008