


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 03, 2006 8:00 am**  
**Secretary of State**

04-03-2006 90351 016 \*\*\*\*61.25

<b>DOCUMENT # N95000005685</b>	
1. Entity Name <b>BAY POINTE VISTA I CONDOMINIUM ASSOCIATION, INC.</b>	

Principal Place of Business <b>236 HIDDEN BAY DR. OSPREY, FL 34229 US</b>	Mailing Address <b>PROGRESSIVE COMMUNITY MGMT. 1801 GLENGARY ST. SARASOTA, FL 34231 US</b>
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2. Principal Place of Business	3. Mailing Address <b>BARLOW GROUP, INC.</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc. <b>3412 CLARK ROAD, PMB#236</b>
City & State	City & State <b>SARASOTA, FL</b>
Zip	Country <b>USA</b>



01122006 Chg-NP CR2E037 (11/05)

4. FEI Number <b>65-0634910</b>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>
6. Name and Address of Current Registered Agent <b>MARKEL, JIM PROGRESSIVE COMMUNITY MGMT. 1801 GLENGARY ST. SARASOTA, FL 34231</b>		
7. Name and Address of New Registered Agent		
Name <b>BARLOW GROUP, INC.</b>		
Street Address (P.O. Box Number is Not Acceptable) <b>2828 CLARK ROAD, SUITE #7</b>		
City <b>SARASOTA</b>		Zip Code <b>FL 34231</b>

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  **JONE BARLOW WEIST, PRESIDENT, BARLOW GROUP, INC. 03/06/2006**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$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	PD COHEN, JULIAN 236 HIDDEN BAY DR # 301 OSPREY, FL 34229 <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	VD MOON, MAX 236 HIDDEN BAY DR #502 OSPREY, FL 34229 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD INGRAM, FREDERIC B., JR. 236 HIDDEN BAY DRIVE #603 OSPREY, FL 34229 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD KELLEY, JACK 236 HIDDEN BAY DR., UNIT 401 OSPREY, FL 34229 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DUBE, DENNIS P. 236 HIDDEN BAY DRIVE #601 OSPREY, FL 34229 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS SUTTON, BILL 1801 GLENGARY ST. SARASOTA, FL 34231 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WEIST, JONE B. 3412 CLARK RD #236 SARASOTA, FL 34231 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT MARKEL, JIM 1801 GLENGARY ST. SARASOTA, FL 34231 <input checked="" 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 exemptions contained 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 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:  **JONE BARLOW WEIST, AS 03/06/2006 (941) 927-1946**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #