

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000516

FILED
Jan 14, 2009
Secretary of State

Entity Name: BAY HARBOUR HOMEOWNERS' ASSOCIATION OF BAYHARBOUR, INC.

Current Principal Place of Business:

52 S. SUNSET HARBOUR
FREEPORT, FL 32439 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1113
FREEPORT, FL 32439 US

New Mailing Address:

FEI Number: 59-3515793 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCKENZIE, CHARLES
52 S. SUNSET HARBOUR
FREEPORT, FL 32439 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 () Delete
Name: MCKENZIE, CHARLES
Address: 52 S. SUNSET HARBOUR
City-St-Zip: FREEPORT, FL 32439 US

Title: T () Delete
Name: CASEY, HAROLD
Address: 935 HARBOUR BLVD
City-St-Zip: FREEPORT, FL 32439 US

Title: S () Delete
Name: BLANTON, KATHY
Address: 94 HARBOUR TRACE
City-St-Zip: FREEPORT, FL 32439

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: MCKENZIE, CHARLES
Address: 52 S. SUNSET HARBOUR
City-St-Zip: FREEPORT, FL 32439 US

Title: T (X) Change () Addition
Name: MASSEY, LAURA
Address: 166 HARBOUR TRACE
City-St-Zip: FREEPORT, FL 32439 US

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

Title: P () Change (X) Addition
Name: WILLIAMS, TAYLOR
Address: 149 FOREST HARBOUR
City-St-Zip: FREEPORT, FL 32439

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: KATHY BLANTON

S

01/14/2009

Electronic Signature of Signing Officer or Director

Date