2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9800000135

FILED Apr 23, 2008 Secretary of State

Entity Name: BAYSIDE PROPERTY OWNERS ASSOCIATION, INC.

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

PO BOX 854 2235 CONCH DRIVE

EASTPOINT, FL 32328 ST. GEORGE ISLAND, FL 32328

Current Mailing Address: New Mailing Address:

PO BOX 854 P O BOX 876

EASTPOINT, FL 32328 EASTPOINT, FL 32328

FEI Number: 59-3522637 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

R.S.H. LAND INVESTMENTS, INC.

P.O. BOX 854

COMMUNITY MANAGEMENT SERVICES,INC
1914 SUNSET DRIVE

EASTPOINT, FL 32328 US ST. GEORGE ISLAND, FL 32328 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: WAYNE M GLEASMAN 04/23/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: P/T (X) Change () Addition

 Name:
 HERREN, ROBERT S
 Name:
 DANTIN, KEITH

 Address:
 P.O. BOX 854
 Address:
 506 FRANK SHAW RD

 City-St-Zip:
 EASTPOINT, FL 32328
 City-St-Zip:
 TALLAHASSEE, FL 32312

Title: VSTD () Delete Title: VP/S (X) Change () Addition

 Name:
 CARROLL, CARRIE
 Name:
 FANN, WAYNE

 Address:
 P.O BOX 854
 Address:
 P.O BOX 5249

 City-St-Zip:
 EASTPOINT, FL 32328
 City-St-Zip:
 VALDOSTA, GA 31603

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

 Name:
 CROFTON, RUSSELL
 Name:

 Address:
 PO BOX 854
 Address:

 City-St-Zip:
 EAST POINT, FL
 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: WAYNE M GLEASMAN M 04/23/2008