## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000001389

FILED Aug 20, 2007 Secretary of State

Entity Name: BAYSIDE CONCOURSE ASSOCIATION, INC.

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

C/O COLLIERS ARNOLD 17757 US HIGHWAY 19 N. #275 CLEARWATER, FL 33772

**New Mailing Address: Current Mailing Address:** 

C/O COLLIERS ARNOLD 17757 US HIGHWAY 19 N. #275 CLEARWATER, FL 33772

FEI Number: 59-3502711 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SMITH, W. LAWRENCE 101 EAST KENNEDY BLVD. **SUITE 3700** TAMPA, FL 33602 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:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition LEVINE, LISA HOYT, KATY Name: Name:

17757 US HIGHWAY 19 N #275 Address: 17757 US HIGHWAY 19 N #275 Address: City-St-Zip: CLEARWATER, FL 33772 City-St-Zip: CLEARWATER, FL 33772

Title: () Delete Title: () Change () Addition

Name: HARRINGTON, ANDREW Name: Address: 12945 SEMINOLE BLVD #2 SUITE 1 Address: City-St-Zip: LARGO, FL 33778 City-St-Zip:

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

LORCH, DAN Name: UNDERWOOD, DEBBIE Name: 15550 LIGHTWAVE DR. Address: Address: 15550 LIGHTWAVE DR City-St-Zip: CLEARWATER, FL 34760 City-St-Zip: CLEARWATER, FL 34760

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

Name: ESTES, PATRICIA Name: 12945 SEMINOLE BLVD BLDG #2, SUITE 1 Address: Address: City-St-Zip: LARGO, FL 33778 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: KATY HOYT **PRES** 08/20/2007