2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001389

FILED Apr 29, 2008 Secretary of State

Entity Name: BAYSIDE CONCOURSE ASSOCIATION, INC.

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

C/O COLLIERS ARNOLD C/O COLLIERS ARNOLD 17757 US HIGHWAY 19 N. #275 311 PARK PLACE BLVD., SUITE 600

CLEARWATER, FL 33772 CLEARWATER FL 33759

Current Mailing Address: New Mailing Address:

C/O COLLIERS ARNOLD C/O COLLIERS ARNOLD 311 PARK PLACE BLVD., SUITE 600 17757 US HIGHWAY 19 N. #275 CLEARWATER, FL 33772 CLEARWATER, FL 33759

FEI Number: 59-3502711 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:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

HOYT, KATY HOYT, KATY Name: Name: 17757 US HIGHWAY 19 N #275 Address: 311 PARK PLACE BLVD., SUITE 600 Address:

CLEARWATER, FL 33772 CLEARWATER, FL 33759

City-St-Zip: City-St-Zip:

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

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

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

UNDERWOOD, DEBBIE Name: Name: 15550 LIGHTWAVE DR Address: Address: City-St-Zip: CLEARWATER, FL 34760 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: MIKE DELP **AGNT** 04/29/2008