

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007448

FILED
Jul 14, 2007
Secretary of State

Entity Name: BAYSHORE PALMS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2918 W. GANDY BLVD., #F
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

2918 W. GANDY BLVD., #F
TAMPA, FL 33611

New Mailing Address:

FEI Number: 59-3664587 **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:

BARONE, G. SCOTT
2918 W. GANDY BLVD #A
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

VU, ALEX
2918 W. GANDY BLVD #F
TAMPA, FL 33611 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: ALEXT33#

07/14/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARONE, G. SCOTT
Address: 2918 W. GANDY BLVD A
City-St-Zip: TAMPA, FL 33611

Title: VD () Delete
Name: KARLE, BRIAN
Address: 2918 W GANDY BLVD F
City-St-Zip: TAMPA, FL 33611

Title: SD () Delete
Name: GENDER, KIMBERLY
Address: 2918 W. GANDY BLVD. F
City-St-Zip: TAMPA, FL 33611

Title: TD () Delete
Name: LEIGH, CHRISTOPHER
Address: 2918 W. GANDY BLVD. F
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BARONE, G. SCOTT
Address: 2918 W. GANDY BLVD UNIT F
City-St-Zip: TAMPA, FL 33611

Title: VD (X) Change () Addition
Name: KARLE, BRYAN
Address: 2918 W GANDY BLVD UNIT F
City-St-Zip: TAMPA, FL 33611

Title: SD (X) Change () Addition
Name: KROEGER, CHRISTIE
Address: 2918 W. GANDY BLVD UNIT F
City-St-Zip: TAMPA, FL 33611

Title: TD (X) Change () Addition
Name: VU, ALEX
Address: 2918 W. GANDY BLVD. UNIT F
City-St-Zip: TAMPA, FL 33611

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: ALEXT33#

TD

07/14/2007

Electronic Signature of Signing Officer or Director

Date