

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2007 8:00 am
Secretary of State

01-08-2007 90245 039 ***150.00

DOCUMENT # P00000104765

1. Entity Name
BAY FOREST REAL ESTATE SERVICES, INC.



Principal Place of Business
377 BAY FOREST DRIVE
NAPLES, FL 34110

Mailing Address
377 BAY FOREST DRIVE
NAPLES, FL 34110 US

60000688



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01042007 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number
65-1086766

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KRAUS, CHERYL R
1072 GOODLETTE ROAD NORTH
NAPLES, FL 34102

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME PINO, PATRICIA
STREET ADDRESS 15174-2 MAJORCA BAY DR
CITY-ST-ZIP NAPLES, FL 34110

TITLE ST ☒ Change ☐ Addition
NAME PATRICIA PINO
STREET ADDRESS 15174-2 MAJORCA BAY DR.
CITY-ST-ZIP NAPLES, FL 34110

TITLE P ☐ Delete
NAME CARLSON, JAMES
STREET ADDRESS 377 BAY FOREST DRIVE
CITY-ST-ZIP NAPLES, FL 34110

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME PIROVANO, FORREST
STREET ADDRESS 15475 CEDARWOOD LN # 205
CITY-ST-ZIP NAPLES, FL 34110

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☒ Delete
NAME CLAPP, ROGER
STREET ADDRESS 15470 CEDARWOOD LANE SUITE 103
CITY-ST-ZIP NAPLES, FL 34110

TITLE D ☐ Change ☒ Addition
NAME RICHARD BERGERON
STREET ADDRESS 363 BAY FOREST DR.
CITY-ST-ZIP NAPLES, FL 34110

TITLE D ☐ Delete
NAME HOLTROP, KEN
STREET ADDRESS 290 NAPLES COVE DRIVE SUITE 2502
CITY-ST-ZIP NAPLES, FL 34110

TITLE VP ☒ Change ☐ Addition
NAME KEN HOLTROP
STREET ADDRESS 290 NAPLES COVE DR, #2502
CITY-ST-ZIP NAPLES, FL 34110

TITLE AS ☐ Delete
NAME HAMPTON, BRYANT
STREET ADDRESS 377 BAY FOREST DRIVE
CITY-ST-ZIP NAPLES, FL 34110

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES CARLSON

1/5/07 239-597-5129

Date

Daytime Phone #