2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2005
Secretary of State

DOCUMENT# P01000068990

Entity Name: BAYSHORE ASSOCIATION MANAGEMENT, INC.

Current Principal Place of Business:

1304 BAYSHORE BLVD.
PORT ST. LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

1304 BAYSHORE BLVD.
PORT ST. LUCIE, FL 34986

New Mailing Address:

1304 BAYSHORE BLVD.
PORT ST. LUCIE, FL 34983

FEI Number: 65-1124562 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MOUTOGIANNIS, LINDA S PRES.
1304 BAYSHORE BLVD.
PORT ST. LUCIE, FL 34983 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MOUTOGIANNIS, LINDA S
Address: 1474 S.E. GRAPELAND AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: ST ( ) Delete
Name: WEBER, BRENDA
Address: 1105 OCEAN DUNES CIRCLE
City-St-Zip: JUPITER, FL 33477

Title: D ( ) Delete
Name: PUBIFICATO, ANTHONY
Address: 1474 S.E. GRAPELAND AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: V ( ) Delete
Name: WEBER, WILLIAM L
Address: 1105 OCEAN DUNES CIR.
City-St-Zip: JUPITER, FL 33477

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change ( ) Addition
Name: WEBER, BRENDA
Address: 559 NE CANOE PARK CIRCLE
City-St-Zip: PORT ST.LUCIE, FL 34983

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change ( ) Addition
Name: WEBER, WILLIAM L
Address: 559 NE CANOE PARK CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34983

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LINDA MOUTOGIANNIS P 01/14/2005

Electronic Signature of Signing Officer or Director — Date