2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000068990

Entity Name: BAYSHORE ASSOCIATION MANAGEMENT, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
430 N W LAKE WHITNEY PLACE PORT ST. LUCIE, FL 34986	

Current Mailing Address:	**New Mailing Address:**
430 N W LAKE WHITNEY PLACE PORT ST. LUCIE, FL 34986	

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

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
MOUTOGIANNIS, LINDA S PRES. 430 N W LAKE WHITNEY PLACE PORT ST. LUCIE, FL 34986 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	P ( ) Delete	Title:	( ) Change ( ) Addition
Name:	MOUTOGIANNIS, LINDA S	Name:	
Address:	1658 SW FORTUNE ROAD	Address:	
City-St-Zip:	PORT SAINT LUCIE, FL 34953	City-St-Zip:	

Title:	ST ( ) Delete	Title:	( ) Change ( ) Addition
Name:	WEBER, WILLIAM L	Name:	
Address:	559 NE CANOE PARK CIRCLE	Address:	
City-St-Zip:	PORT ST.LUCIE, FL 34983	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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM L. WEBER   ST   02/06/2009
            Electronic Signature of Signing Officer or Director   Date