


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90110 032 ***150.00

DOCUMENT # P97000095705 1. Entity Name BAY LANDING I, INC.					
Principal Place of Business 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105			Mailing Address 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		05012008 Chg-P CR2E034 (12/06)	
Zip		Country		4. FEI Number 59-3477282	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MARINELLI, PAUL J 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105				7. Name and Address of New Registered Agent Name BRADLEY A BOAZ 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 <u><i>Bradley A Boaz</i></u> Bradley A Boaz <u>5/1/08</u> <small>Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reappointing.</small> DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MARINELLI, PAUL J 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V BORDEN, DAVID K 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST BOAZ, BRADLEY A 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SPROUL, JULIET C 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C/D GABLE, LAMAR 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D COLLIER, BARRON III 2600 GOLDEN GATE PARKWAY NAPLES, FL 34105	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DAVID K BORDEN				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V/S/T BRADLEY A BOAZ				
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: <u><i>Bradley A Boaz</i></u> Bradley A Boaz <u>5/1/08</u> 239-262-2600 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <small>Date</small> <small>Daytime Phone #</small>					

40001010



ATTACHMENT

ATTACHMENT TO 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000095705

ENTITY: BAY LANDING I, INC.

FEI NUMBER: 59-3477282

40091919

ADDITIONAL OFFICERS AND DIRECTORS

TITLE:	D	
NAME	FRANCES G VILLERE	<input checked="" type="checkbox"/> Addition
STREET ADDRESS	2600 GOLDEN GATE PARKWAY	
CITY-ST-ZIP	NAPLES, FL 34105	
TITLE:	D	
NAME	PHYLLIS G ALDEN	<input checked="" type="checkbox"/> Addition
STREET ADDRESS	2600 GOLDEN GATE PARKWAY	
CITY-ST-ZIP	NAPLES, FL 34105	
TITLE:	D	
NAME	DONNA G KELLER	<input checked="" type="checkbox"/> Addition
STREET ADDRESS	2600 GOLDEN GATE PARKWAY	
CITY-ST-ZIP	NAPLES, FL 34105	
TITLE:	D	
NAME	KATHERINE G SPROUL	<input checked="" type="checkbox"/> Addition
STREET ADDRESS	2600 GOLDEN GATE PARKWAY	
CITY-ST-ZIP	NAPLES, FL 34105	