2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2018
Secretary of State
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Entity Name: BAYWOOD VILLAGE ASSOCIATION, INC.

Current Principal Place of Business:

309 WESTWINDS
PALM HARBOR, FL 34683

Current Mailing Address:

309 WESTWINDS
PALM HARBOR, FL 34683 US

FEI Number: 59-1914475

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

O'HANLON, JOHN
215 DRIFTWOOD DR. N.
PALM HARBOR, FL 34683 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: JOHN O'HANLON 01/19/2018

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	O'HANLON, JOHN
Address	215 DRIFTWOOD DR. N.
City-State-Zip:	PALM HARBOR FL 34683

Title	VP
Name	HOVSEPIAN, MARIA
Address	215 WESTWINDS DR.
City-State-Zip:	PALM HARBOR FL 34683

Title	DIRECTOR
Name	HOVSEPIAN, ED
Address	215 WESTWINDS DR.
City-State-Zip:	PALM HARBOR FL 34683

Title	TREASURER
Name	KAUFMANN, THOMAS C
Address	400 DRIFTWOOD DR. W.
City-State-Zip:	PALM HARBOR FL 34683

Title	DIRECTOR
Name	FRAZHO, GARY
Address	216 WESTWINDS DR.
City-State-Zip:	PALM HARBOR FL 34683

Title	DIRECTOR
Name	LONDERGAN, JEREMY
Address	103 DRIFTWOOD DR. W.
City-State-Zip:	PALM HARBOR FL 34683

Title	SECRETARY
Name	VARGO, DONNA
Address	218 DRIFTWOOD DRIVE SOUTH
City-State-Zip:	PALM HARBOR FL 34683

I hereby 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 all other like empowered.

SIGNATURE: THOMAS C. KAUFMANN TREASURER 01/19/2018

Electronic Signature of Signing Officer/Director Detail — Date