

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705784

Entity Name: BAY AREA APARTMENT ASSOCIATION, INC.**Current Principal Place of Business:**19031 N. DALE MABRY HWY.
LUTZ, FL 33548**Current Mailing Address:**19031 N. DALE MABRY HWY.
LUTZ, FL 33548 US**FEI Number:** 59-1590814**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCMILLAN, JOHN
5309 E. BUSCH BLVD
TEMPLE TERRACE, FL 33617 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

Officer/Director Detail :

Title PRESIDENT
Name PETRAS, JORDAN
Address 9902 BROMPTON DRIVE
City-State-Zip: TAMPA FL 33626

Title SECRETARY
Name COLETTI, AMY
Address 3347 W. BEARSS AVE
City-State-Zip: TAMPA FL 33618

Title PPD
Name GRIFFITHS, ROBERT
Address POST OFFICE BOX 26162
City-State-Zip: TAMPA FL 33623

Title PAST PRESIDENT
Name FORD, CECILIA
Address 2600 LAKE LUCIEN DR
 #325
City-State-Zip: MAITLAND FL 32751

Title ED
Name GANG, NENA
Address 19031 N. DALE MABRY HWY.
City-State-Zip: LUTZ FL 33548

Title PPD
Name ROSENWASSER, MARC
Address 3347 W. BEARSS AVENUE
City-State-Zip: TAMPA FL 33618

Title PPD
Name HAMMOND, DANA
Address 4890 W. KENNEDY BLVD.
 #240
City-State-Zip: TAMPA FL 33609

Title 1ST VICE PRESIDENT
Name KOBACK, CHRIS
Address 147 2ND AVENUE SOUTH
 #408
City-State-Zip: ST. PETERSBURG FL 33701

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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: NENA GANG**EVP****04/30/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSOCIATES PRESIDENT
Name INK, MELISSA
Address 4002 W. ALVA STREET
City-State-Zip: TAMPA FL 33614

Title TREASURER
Name DAILEY, LISA
Address 14502 N. DALE MABRY HWY
City-State-Zip: TAMPA FL 33618