

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 716171

**Entity Name:** BAYWAY ISLES-POINT BRITTANY TWO CONDOMINIUM CORPORATION, INC.

**FILED**  
**Apr 28, 2021**  
**Secretary of State**  
**7558258060CC**

**Current Principal Place of Business:**

5055 BRITTANY DRIVE SOUTH  
ST PETERSBURG, FL 33715

**Current Mailing Address:**

5055 BRITTANY DRIVE SOUTH  
ST PETERSBURG, FL 33715 US

**FEI Number: 59-1514595**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

POINT BRITTANY TWO CONDOMINIUM CORP. INC.  
5055 BRITTANY DRIVE SOUTH  
ST PETERSBURG, FL 33715 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: SCOTT DURIE

04/28/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           REID, JOHN  
Address        5055 BRITTANY DRIVE SOUTH  
City-State-Zip: ST PETERSBURG FL 33715

Title           PRESIDENT  
Name           DURIE, SCOTT  
Address        5055 BRITTANY DRIVE SOUTH  
City-State-Zip: ST PETERSBURG FL 33715

Title           SECRETARY  
Name           YELLIN, ANDREA  
Address        5055 BRITTANY DRIVE SOUTH  
City-State-Zip: ST PETERSBURG FL 33715

Title           VP  
Name           SOMBAT, LOU  
Address        5055 BRITTANY DRIVE SOUTH  
City-State-Zip: ST PETERSBURG FL 33715

Title           DIRECTOR  
Name           MAHER, DAN  
Address        5055 BRITTANY DRIVE SOUTH  
City-State-Zip: ST PETERSBURG FL 33715

Title           DIRECTOR, ALTERNATE  
Name           SIMMENS, MARLENE  
Address        5055 BRITTANY DRIVE SOUTH  
City-State-Zip: ST PETERSBURG FL 33715

*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: SCOTT DURIE

PRESIDENT

04/28/2021

Electronic Signature of Signing Officer/Director Detail

Date