

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 719649

**Entity Name:** PALM BAY ASSOCIATION, INC.**Current Principal Place of Business:**5960 MIDNIGHT PASS ROAD  
SARASOTA, FL 34242**Current Mailing Address:**5960 MIDNIGHT PASS ROAD  
SARASOTA, FL 34242**FEI Number:** 59-1368543**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LOBECK, DANIEL JESQ.  
THE LAW OFFICES OF LOBECK & HANSON, P.A.  
2033 MAIN STREET, SUITE 403  
SARASOTA, FL 34237 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 DIRECTOR  
Name YANNES, CHRISTOPHER  
Address 6002 SHEARWATER LANE  
City-State-Zip: LITHIA FL 33547Title VPD  
Name HALVERSON, ROY  
Address 471 DUCHAMP DR  
City-State-Zip: NOKOMIS FL 34275Title SECRETARY  
Name SOMMER, BRIDGET  
Address 6500 WOOD VAIL COURT  
City-State-Zip: LOUISVILLE KY 40241Title PD  
Name WAKEFORD, SHELAGH  
Address 5966 MIDNIGHT PASS RD #51  
City-State-Zip: SARASOTA FL 34242Title TREASURER  
Name LAINO, GERARD  
Address 124 SHINNECOCK LANE  
City-State-Zip: MANALAPAN NJ 07726

*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:** SHELAGH WAKEFORD

PRESIDENT

03/15/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date