## 2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 738251** 

Entity Name: BAY ISLES BAYOU ASSOCIATION, INC.

**FILED** Apr 25, 2025 **Secretary of State** 8876488228CC

Date

## **Current Principal Place of Business:**

595 BAY ISLES RD, STE 225 LONGBOAT KEY, FL 34228

## **Current Mailing Address:**

PO BOX 8158

LONGBOAT KEY. FL 34228 US

FEI Number: 59-1797525 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LONGBOAT PRIVATE SERVICES 595 BAY ISLES RD, STE 225 LONGBOAT KEY, FL 34228 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: DAVID NOVAK 04/25/2025

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER** PACK, FRANK FURRY, STEPHEN Name Name Address 595 BAY ISLES RD Address 595 BAY ISLES RD

STE 225 STE 225

City-State-Zip: LONGBOAT KEY FL 34228-3149 City-State-Zip: LONGBOAT KEY FL 34228-3149

Title Title ASST. SECRETARY Name DOBBYN, COLM Name NOVAK, DAVID

595 BAY ISLES RD 595 BAY ISLES RD, STE 225 Address Address

STE 225

City-State-Zip: LONGBOAT KEY FL 34228 City-State-Zip: LONGBOAT KEY FL 34228-3149

Title **SECRETARY** Name MINANO, DENNIS Address 595 BAY ISLES RD STE 225

City-State-Zip: LONGBOAT KEY FL 34228-3149

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.

04/25/2025 SIGNATURE: DAVID NOVAK PROPERTY MANAGER