

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 741717

**Entity Name:** BAYSHORE TRACE CONDOMINIUM ASSOCIATION, INC**Current Principal Place of Business:**3325 BAYSHORE BLVD  
ATTN OFFICE  
TAMPA, FL 33629**Current Mailing Address:**3325 BAYSHORE BLVD  
ATTN OFFICE  
TAMPA, FL 33629**FEI Number:** 59-1829609**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ANNE HATHORN LEGAL SERVICES, LLC  
150 2ND AVE. N.  
STE. 1270  
SAINT PETERSBURG, FL 33701 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:** ANNE HATHORN

01/08/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ARTHUR, ALVES E II  
Address        3325 BAYSHORE BLVD  
                  ATTN OFFICE  
City-State-Zip: TAMPA FL 33629

Title            VP  
Name            CRUZE, JESSICA  
Address        3325 BAYSHORE BLVD  
                  ATTN OFFICE  
City-State-Zip: TAMPA FL 33629

Title            SECRETARY  
Name            SIERRA, LAURA  
Address        3325 BAYSHORE BLVD  
                  ATTN OFFICE  
City-State-Zip: TAMPA FL 33629

Title            DIRECTOR  
Name            STARNER, DAVID  
Address        3325 BAYSHORE BLVD  
                  ATTN OFFICE  
City-State-Zip: TAMPA FL 33629

Title            DIRECTOR  
Name            DURKIN, KATHERINE  
Address        3325 BAYSHORE BLVD  
                  ATTN OFFICE  
City-State-Zip: TAMPA FL 33629

Title            TREASURER  
Name            GAVALAS, STEVEN  
Address        3325 BAYSHORE BLVD  
                  ATTN OFFICE  
City-State-Zip: TAMPA FL 33629

*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:** ARTHUR ALVES

PRESIDENT

01/08/2022

Electronic Signature of Signing Officer/Director Detail

Date