

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 760071

**FILED**  
**Apr 22, 2024**  
**Secretary of State**  
**6603560120CC**

**Entity Name:** BAY FOREST HOMEOWNERS ASSOCIATION, INC. COMMONS THREE

**Current Principal Place of Business:**

27180 BAY LANDING DRIVE  
SUITE 4  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

27180 BAY LANDING DRIVE  
SUITE 4  
BONITA SPRINGS, FL 34135 US

**FEI Number:** 65-0311921

**Certificate of Status Desired:** No

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

VESTA PROPERTY SERVICES, INC.  
27180 BAY LANDING DRIVE  
SUITE 4  
BONITA SPRINGS, FL 34135 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:** CARINA SHEFFIELD

04/22/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name SCOONES, MARY-SHEILA  
Address 27180 BAY LANDING DRIVE  
SUITE 4  
City-State-Zip: BONITA SPRINGS FL 34135

Title PRESIDENT, TREASURER  
Name SOFYANOS, THOMAS  
Address 27180 BAY LANDING DRIVE  
SUITE 4  
City-State-Zip: BONITA SPRINGS FL 34135

Title VP  
Name NICHOLS, RICHARD  
Address 27180 BAY LANDING DRIVE  
SUITE 4  
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR  
Name BUTLER, SANDY  
Address 27180 BAY LANDING DR., SUITE 4  
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR  
Name SHAPIRO, DAVID  
Address 27180 BAY LANDING DR., SUITE 4  
City-State-Zip: BONITA SPRINGS FL 34135

*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:** THOMAS SOFYANOS

PRESIDENT

04/22/2024

Electronic Signature of Signing Officer/Director Detail

Date