

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000005224

**FILED**  
**Apr 14, 2018**  
**Secretary of State**  
**CC2790182834**

**Entity Name:** BAYOU VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

905 EAST MARTIN LUTHER KING, JR. DRIVE  
SUITE 460  
TARPON SPRINGS, FL 34689-4829

**Current Mailing Address:**

905 EAST MARTIN LUTHER KING, JR. DRIVE  
SUITE 460  
TARPON SPRINGS, FL 34689-4829 US

**FEI Number:** 05-0573030

**Certificate of Status Desired:** No

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

WHETZEL, TERRI B  
905 EAST MARTIN LUTHER KING, JR. DRIVE  
SUITE 460  
TARPON SPRINGS, FL 34689-4829 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 PD  
Name ZORN, JEFFREY  
Address 905 EAST MARTIN LUTHER KING, JR.  
DRIVE  
SUITE 460  
City-State-Zip: TARPON SPRINGS FL 34689-4829

Title SD  
Name RIENDEAU, BENOIT  
Address 905 EAST MARTIN LUTHER KING, JR.  
DRIVE  
SUITE 460  
City-State-Zip: TARPON SPRINGS FL 34689-4829

Title TD  
Name CARRIER, MIA  
Address 905 EAST MARTIN LUTHER KING, JR.  
DRIVE  
SUITE 460  
City-State-Zip: TARPON SPRINGS FL 34689-4829

Title D  
Name QUEEN, GARY F  
Address 905 EAST MARTIN LUTHER KING, JR.  
DRIVE  
SUITE 460  
City-State-Zip: TARPON SPRINGS FL 34689-4829

*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:** JEFFREY ZORN

**PRESIDENT**

**04/14/2018**

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

\_\_\_\_\_  
Date