

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26571

Entity Name: BAHIA SOUND HOME OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**8184 SE WINDJAMMER WAY
PO BOX 1576
HOBE SOUND, FL 33455**Current Mailing Address:**P.O. BOX 1576
HOBE SOUND, FL 33455**FEI Number: 65-0153351****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.
C/O JANE CORNETT
759 SW FEDERAL HWY., SUITE 213
STUART, FL 34994 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	TREASURER
Name	STOREY, ALYSSA
Address	8071 SE WINDJAMMER WAY
City-State-Zip:	HOBE SOUND FL 33455

Title	VP
Name	FROIO, VINCENT
Address	8007 SE WINDJAMMER WAY
City-State-Zip:	HOBE SOUND FL 33455

Title	SECRETARY
Name	LEONARD, JOHN
Address	8337 SE KETCH COURT
City-State-Zip:	HOBE SOUND FL 33455

Title	PRESIDENT
Name	JOEL, JEFFERY A
Address	8184 SE WINDJAMMER WAY
City-State-Zip:	HOBE SOUND FL 33455

Title	DIRECTOR
Name	LEWIS, JAMES
Address	8072 SE WINDJAMMER WAY
City-State-Zip:	HOBE SOUND FL 33455

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: ALYSSA A STOREY**TREASURER****01/27/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date