

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749323

FILED
Jan 19, 2009
Secretary of State

Entity Name: 5010 BAYSHORE CONDOMINIUM, INC.

Current Principal Place of Business:

5010 BAYSHORE BLVD.
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

5010 BAYSHORE BLVD.
#1
TAMPA, FL 33611

New Mailing Address:

FEI Number: 59-1968869 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIX, GILMER H
5010 BAYSHORE BLVD., #1
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: NIX, GILMER H
Address: 5010 BAYSHORE BLVD.
City-St-Zip: TAMPA, FL 33611

Title: DS () Delete
Name: GARRETT, MURRAY
Address: 5010 BAYSHORE BLVD., #2
City-St-Zip: TAMPA, FL 33611

Title: DT () Delete
Name: ARIZU, BETSY
Address: 5010 BAYSHORE BLVD., #9
City-St-Zip: TAMPA, FL 33611

Title: DV () Delete
Name: CHARLES, FORD
Address: 5010 BAYSHORE BLVD., #6
City-St-Zip: TAMPA, FL 33611

Title: D () Delete
Name: GREGORY, ORCUTT
Address: 5010 BAYSHORE BLVD., #12
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GILMER NIX

_____ Electronic Signature of Signing Officer or Director

PRES

01/19/2009

_____ Date