


FILE NOW: FILING FEE IS \$61.25

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Apr 01, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 717251					
1. Corporation Name BAY COLONY CLUB CONDOMINIUM INC.					
Principal Place of Business 6333 BAY CLUB DRIVE FORT LAUDERDALE FL 33308			Mailing Address 6333 BAY CLUB DRIVE FORT LAUDERDALE FL 33308		



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		09/25/1969	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-1581376	
24 Country		29 Country		30	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Election Campaign Financing <input type="checkbox"/>				\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
RON D'ANNA MATTIN & MCCLOSKEY 5355 TOWNCENTER ROAD #001 BOCA RATON FL 33486				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 2300 Glades Road, Suite 400 83 84 City Boca Raton FL 85 Zip Code 33431			

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE D <input type="checkbox"/> DELETE NAME LAUTH, GEORGE STREET ADDRESS 6471-1 BAY CLUB DR. CITY-ST-ZIP FT. LAUDERDALE FL 33308				1.1 TITLE P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1.2 NAME Beauchamp, John 1.3 STREET ADDRESS 6471-4 Bay Club Drive 1.4 CITY-ST-ZIP Ft. Lauderdale, FL 33308			
TITLE S <input checked="" type="checkbox"/> DELETE NAME DIMARTINO, JOAN STREET ADDRESS 6451-3 BAY CLUB DR CITY-ST-ZIP FT. LAUDERDALE FL				2.1 TITLE S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2.2 NAME Passionino, Deborah 2.3 STREET ADDRESS 6231-1 Bay Club Drive 2.4 CITY-ST-ZIP Ft. Lauderdale, FL 33308			
TITLE D <input checked="" type="checkbox"/> DELETE NAME LOGDAN, NANCY STREET ADDRESS 6407-3 BAY CLUB DR CITY-ST-ZIP FT. LAUDERDALE FL				3.1 TITLE VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3.2 NAME Resk, Richard 3.3 STREET ADDRESS 6525-1 Bay Club Drive 3.4 CITY-ST-ZIP Ft. Lauderdale, FL 33308			
TITLE D <input checked="" type="checkbox"/> DELETE NAME LEWIS, ROBERT STREET ADDRESS 6361-4 BAY CLUB DR CITY-ST-ZIP FT LAUDERDALE FL 33308				4.1 TITLE T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4.2 NAME Borum, William 4.3 STREET ADDRESS 6381-4 Bay Club Drive 4.4 CITY-ST-ZIP Ft. Lauderdale, FL 33308			
TITLE P <input checked="" type="checkbox"/> DELETE NAME LEGGETT, JACK STREET ADDRESS 6525-2 BAY CLUB DR CITY-ST-ZIP FT. LAUDERDALE FL 33308				5.1 TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5.2 NAME Aloisi, Alfred 5.3 STREET ADDRESS 6529-4 Bay Club Drive 5.4 CITY-ST-ZIP Ft. Lauderdale, FL 33308			
TITLE V <input type="checkbox"/> DELETE NAME LOMBARDI, LESLEY STREET ADDRESS 6419-2 BAY CLUB DR CITY-ST-ZIP FT. LAUDERDALE FL 33308				6.1 TITLE D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME Lombardi, Lesley 6.3 STREET ADDRESS 6419-2 Bay Club Drive 6.4 CITY-ST-ZIP Ft. Lauderdale, FL 33308			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William J. Borum 3/29/99 (954) 491-4040
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)