FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(6)

BAY HILL VILLAGE CLUB CONDOMINIUM ASSOCIATION, I NC.											
Principal Pla	ce of Busines	SS	М	lailing Address					n hodini fadda drisk dinan tudak bisha dan atani dikati digih diani glabi dika		
8913 SAVANNAH PK. 8913 SAVANNAH PK. ORLANDO FL 32819 ORLANDO FL 32819					•				3. Date Incorporated or Qualified 09/10/1980 4. FEI Number Applied For 59-2055665 Not Applicable		
2. Principal Place of Business 2a. Mailing Address											
21			26						5. Certificate of Status Desired \$8.75 Addition Fee Require	d	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					6. Election Campaign Financing \$5.00 May E Trust Fund Contribution Added to Fee			
City & Sta	ate		City & State					7. Is this nonprofit corporation a homeowners association?			
23			28						Yes No		
Zip		Country	— <u> </u>			Country			8. This corporation owes or has paid the current year Intangib Personal Property Tax due June 30. Yes No	ele	
24	9 Name	25 and Address of Curr	29 ent Regis	stered Agent	[30]	η_			Personal Property Tax due June 30.		
	8. (48)	TEND ACCUES OF CALL	THE PARTY	resea vilasis		81	Name		10. Hante and Address of Iron Registered Agent		
STRIZACK, JOE 8943 SAVANAH PARK						82		Address	dress (P.O. Box Number is Not Acceptable)		
ORLANDO FL 32819						83	—				
37.5 3 W						84	City		FL 85 Zip Code		
agent. I i SIGNATURE		ith, and accept the obl							ation submits this statement for the purpose of changing its regists board of directors. I hereby accept the appointment as registed when reinstating)		
12.			ND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12	
TITLE	PD			☐ DELETE	1.1	1.1 TITLE		D	Change □	Addition	
NAME		AIKEN, CHARLES		1.2	1.2 NAME						
STREET ADDRESS			1.		1.3 STREET ADDRESS						
CITY-ST-ZIP				T DELETE		1.4 CITY - ST - ZIP		_			
TITLE	VPD	-			2.1 TITLE		P	Change [Addition		
NAME				1 · · · ·		22 NAME					
STREET ADDRESS	001 1400 51					2.3 STREET ADDRESS					
CITY-ST-ZIP TITLE		SD DELETE			2. 4 CITY-ST-ZIP 3.1 TITLE			☐ Change ☐	Addition		
NAME	1	EDIN ICAN		_		NAME				, ALUKIUI	
STREET ADDRESS		CHAMBERLIN, JEAN 5933 CHESAPEAK PARK		- 1	3.3 STREET ADDRESS		1				
CITY-ST-ZIF	ORLANG										
TITLE	TD				3.4. CITY-ST-ZIP 4.1 TITLE			☐ Change ☐	Addition		
NAME	MILLER,	MARY			4. 2	NAME					
STREET ADDRESS		HESAPEAKE PARK			4.3	4.3 STREET ADDRESS		1			
CITY-ST-ZIP	ORLAND				4.4	4 CITY - ST - ZIP					
TITLE				DELETE	5.1	TITLE		VP.	Change K	Addition	
NAME					5.2	NAME					
STREET ADDRESS	1							$Bill_{\perp}$	RICHAIOS ALON DARK		
CITY-ST-ZIP						STREET	ADDRESS	Bill 605	Richards Park Lexington Park		
	<u> </u>				5.4	STREET		Bill 605 Or	lande, FL	<u> </u>	
TITLE				DELETE	5.4 6.1	STREET CITY - S TITLE	ST-ZIP	<u> </u>	lande, FL	Addition	
NAME"			<u></u>	DELETE	5.4 6.1 6.2	STREET CITY-S TITLE NAME	ST-ZIP	<u> </u>	lande, FL	Addition	
				DELETE	5.4 6.1 6.2 6.3	STREET CITY-S TITLE NAME	ST-ZIP	<u> </u>	lande, FL	Addition	

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.

FILED

May 13 1998 8:00am

Secretary of State