2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#754119

FILED Apr 10, 2007 Secretary of State

Entity Name: BAY HILL VILLAGE CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
2180 WES	T SR 434					
STE 5000 LONGWO	OD, FL 3277	9				
Current Mailing Address:			New Maili	New Mailing Address:		
2180 WES STE 5000 LONGWO	ST SR 434 OD, FL 3277	9				
FEI Number:	: 59-2055665	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired (()	
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:		
2180 WES STE 5000 LONGWO	OD, FL 3277			ita nanistana di affina na manistana di ancesta an	- 141-	
	named entity e of Florida.	submits this statement for th	e purpose of changing	its registered office or registered agent, or	botn,	
SIGNATUF						
	Electro	nic Signature of Registered A	Agent	Date		
OFFICERS	S AND DIREC	CTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRE	CTORS:	
Title: Name: Address: City-St-Zip:	PD (RICHARDS, B 6056 LEXING ORLANDO, FL	TON PARK	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VPD (CLIEN, SCOT 5948 CHESEF ORLANDO, FL	PEAKE PARK	Title: Name: Address: City-St-Zip:	D (X) Change () Addition CLINE, SCOTT 5948 CHESEPEAKE PARK ORLANDO, FL 32819		
Title: Name: Address: City-St-Zip:	SD (WILSON, ROE 6048 LEXING ORLANDO, FL	TON PARK	Title: Name: Address: City-St-Zip:	SD (X) Change () Addition HYDE, BETTY 5941 CHESAPEAKE PARK ORLANDO, FL 32819		
Title: Name: Address: City-St-Zip:	TD (LANG, ALBER 5949 CHESAF ORLANDO, FL	PEAKE PARK	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (YOUNT, ROBE 8959 CHARLE ORLANDO, FL	STON PARK	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (HEISTAND, BI 8631 CRESTO ORLANDO, FL	SATE CIR	Title: Name: Address: City-St-Zip:	VPD (X) Change () Addition HEISTAND, BRENDA 6060 LEXINGTON PARK ORLANDO, FL 32819		

I hereby certify that the information supplied with this filing does not qualify for the 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: BILL RICHARDS PD 04/10/2007