

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2005 8:00 am
Secretary of State

03-24-2005 90042 005 ****61.25

DOCUMENT # N00511

1. Entity Name
**BAY HILL ESTATES PROPERTY OWNERS
ASSOCIATION, INC.**



Principal Place of Business
**9100 BAY HILL DRIVE
WEST PALM BEACH, FL 33412 US**

Mailing Address
**9100 BAY HILL DRIVE
WEST PALM BEACH, FL 33412 US**



2. Principal Place of Business

3. Mailing Address

ASSOCIATED PROPERTY MGMT
Suite, Apt. #, etc.
1928 LAKE WORTH RD

ASSOCIATED PROPERTY MGMT
Suite, Apt. #, etc.
1928 LAKE WORTH RD.

City & State
LAKE WORTH, FL

City & State
LAKE WORTH, FL

Zip
33461

Country
USA

Zip
33461

Country
USA

03042005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2376493

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DICKER, KRIVOK AND STOLOF, P.A.
% JAMES KRIVOK
1818 AUSTRALIAN AVE., STE 400
WEST PALM BEACH, FL 33409**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ASD
WEINGARTEN, JOHN
11870 STONEHAVEN WAY
WEST PALM BEACH, FL 33412** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
STEDMAN, KAREN
11700 BLACKWOODS LANE
WEST PALM BEACH, FL 33412** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
HYMEN, RONALD 1 1528 RU
11528 RIVERCHASE RUN
WEST PALM BEACH, FL 33412** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
SKYLAR, DAVID
11879 SANDBURN CT
WEST PALM BEACH, FL 33412** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
FILSON, DANIEL
8787 MARLAMOOR LANE
WEST PALM BEACH, FL 33412** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
FILSON, DANIEL
8787 MARLAMOOR LN.
WEST PALM BEACH, FL 33412** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
PINCUS, LEWIS
11550 BLACKHAVEN LN.
WEST PALM BEACH, FL 33412** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
DUCKWORTH, EDGAR (TIM)
11837 DUNBAR CT.
WEST PALM BEACH, FL 33412** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
RUSSEK, WILLIAM
11960 TORREYMANA CIRCLE
WEST PALM BEACH, FL 33412** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
FISCHER, ERIC
11708 RIVERCHASE RUN
WEST PALM BEACH, FL 33412** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SHAPIRO, TED
11980 KESWICK WAY
WEST PALM BEACH, FL 33412** ☐ Change ☒ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANIEL P. FILSON *Daniel P. Filson* **Mar 19 2005** **561-636-6422**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #