

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morthers  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 MAY -1 AM 9:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **N94000006252 (0)**

1. Corporation Name

**BAY HARBOR COMMUNITY ASSOCIATION, INC.**

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
6702 LONE OAK BLVD. NAPLES FL 33942

3. Date Incorporated or Qualified 12/22/1994  
3a. Date of Last Report  
4. FEI Number 65-0573124 Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip  
24 Country 29 Country 30 Country

5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  \$68.75 Supplemental Fee Not Required  
8. This corporation has liability for enterprise tax under S. 195.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
RUEMLER, TOM  
6702 LONE OAK BLVD.  
NAPLES FL 33942

10. Name and Address of New Registered Agent  
B1 Name TIM RUEMLER  
B2 Street Address (P.O. Box Number is Not Acceptable)  
B3  
B4 City FL B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE 5/11/95  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS  
PD WEGWERT, TOM  
6702 LONE OAK BLVD.  
NAPLES FL 33942  
TD MCLEOD, MIKE  
6702 LONE OAK BLVD.  
NAPLES FL 33942  
VD MCNILLIN, WEG  
6702 LONE OAK BLVD.  
NAPLES FL 33942  
S FLISS, DIANA  
6702 LONE OAK BLVD.  
NAPLES FL 33942

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  Change  Addition  
1.2 NAME 500001522305  
1.3 STREET ADDRESS -06/23/95--01080--016  
1.4 CITY-ST-ZIP \*\*\*\*\*61.25 \*\*\*\*\*61.25  
2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE SECRETARY/DIRECTOR  Change  Addition  
3.2 NAME STEVE PEEL  
3.3 STREET ADDRESS 6702 LONE OAK BLVD.  
3.4 CITY-ST-ZIP  
4.1 TITLE VICE PRESIDENT/DIRECTOR  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS 6702 LONE OAK BLVD.  
4.4 CITY-ST-ZIP  
5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption provided in Section 110.07(3)(k), 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DIANA M. FLISS, VP 4.1995 0135984MNS  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Indicate Month & Year)

RECEIVED BY MAY 1 CH