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NONPROFIT
CORPORATION
ANNUAL REPORT
1999

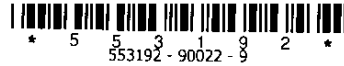


FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000004511

1. Corporation Name

BAY VILLAGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

6488 U.S. HIGHWAY 41 NORTH
APOLLO BEACH FL 33572

Mailing Address

6488 U.S. HIGHWAY 41 NORTH
APOLLO BEACH FL 33572

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip Country

3. Date Incorporated or Qualified

08/05/1998

4. FEL Number
Applied For

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

BEGGINS, JIM
6488 U.S. HIGHWAY 41 NORTH
APOLLO BEACH FL 33572

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ~~D~~ DELETE
NAME ANIS, FOUAD
STREET ADDRESS 2841 NORTH OCEAN BLVD - #1904
CITY-ST-ZIP FORT LAUDERDALE FL 33308

TITLE D DELETE
NAME BEGGIN, JIM
STREET ADDRESS 6488 U.S. HIGHWAY 41 NORTH
CITY-ST-ZIP APOLLO BEACH FL 33572

TITLE D DELETE
NAME GHABBOUR, GHABBOUR DR.
STREET ADDRESS 6336 COCOA LANE
CITY-ST-ZIP APOLLO BEACH FL 33572

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D Change Addition
1.2 NAME Ralph Malik (Malik) Change Addition
1.3 STREET ADDRESS 1795 Stepstone Court
1.4 CITY-ST-ZIP Lawrenceville, Ga. 30043

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP Change Addition

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP Change Addition

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP Change Addition

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP Change Addition

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP Change Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: X

STRALUFER, JIM

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/99 (770) 307-5523

Date

Daytime Phone #

CR2E037 (1/98)