

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAR 13 AM 11:08

DOCUMENT # 751875 (6)

1. Corporation Name

BAY LAKE ESTATES ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O GORDON S DINGER
8612 53RD AVE W
BRADENTON FL 34210-9234
US

C/O GORDON S DINGER
8612 53RD AVE W
BRADENTON FL 34210-9234
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/03/1980

3a. Date of Last Report

04/13/1994

4. FEI Number

59-2263862

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)

☐

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Zip

24

29

Country

Country

25

30

Address of Current Registered Agent

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	SD
NAME	MUTH, HAROLD
STREET ADDRESS	8712 64TH AVE W
CITY-ST-ZIP	BRADENTON FL
TITLE	PD
NAME	DINGER GORDON S
STREET ADDRESS	8216 53RD AVE WEST
CITY-ST-ZIP	BRADENTON FL
TITLE	VPD
NAME	BELLNO, VITO
STREET ADDRESS	8811 51ST AVE WEST
CITY-ST-ZIP	BRADENTON FL
TITLE	DT
NAME	S&RU, SJARPH
STREET ADDRESS	5312 88TH ST W
CITY-ST-ZIP	BRADENTON FL
TITLE	D
NAME	ATCHISON, ANJA
STREET ADDRESS	5323 88TH ST W
CITY-ST-ZIP	BRADENTON FL
TITLE	D
NAME	RIDENOUR, STEVEN
STREET ADDRESS	5015 CONAL LAKE DR
CITY-ST-ZIP	BRADENTON FL

1.1 TITLE	D
1.2 NAME	REED, RAYMOND
1.3 STREET ADDRESS	5201 88TH ST W
1.4 CITY-ST-ZIP	BRADENTON FL
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	DT
4.2 NAME	SPRY, SHARON
4.3 STREET ADDRESS	5312 88TH ST W
4.4 CITY-ST-ZIP	BRADENTON
5.1 TITLE	SD
5.2 NAME	ATCHISON, ANJA
5.3 STREET ADDRESS	5323 88TH ST W
5.4 CITY-ST-ZIP	BRADENTON FL
6.1 TITLE	D
6.2 NAME	SLEETH, STEVEN
6.3 STREET ADDRESS	8608 51ST AVE W
6.4 CITY-ST-ZIP	BRADENTON FL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information included 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 a person authorized to receive or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 of Block 13 of this report.

SIGNATURE:

GORDON S. DINGER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 6, 1995

(013) 724-1134