FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 9:22

DOCUMENT # **741605** **(0)**

1. Corporation Name

BAYSIDE VILLAS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
13391 MCGREGOR BLVD S.W. FT MYERS FL 33919-5996	13391 MCGREGOR BLVD S.W. FT MYERS FL 33919-5996

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/14/1978
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-1978203 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required

2. Principal Place of Business	2a. Mailing Address
21 P.O. Box 194	26 P.O. Box 194
Suite, Apt. #, etc. 22 Attn: Assn. Mgmt.	Suite, Apt. #, etc. 27 Attn: Assn. Mgmt.
City & State 23 Captiva Island, FL	City & State 28 Captiva Island, FL
Zip 24 33924 Country 25	Zip 29 33924 Country 30

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

HILTON GRAND VACATIONS COMPANY
13391 MCGREGOR BLVD S.W.
FT. MYERS FL 33919-5996

10. Name and Address of New Registered Agent

61 Name: South Seas Plantation Resort
62 Street Address (P.O. Box Number is Not Acceptable): 13000 Captiva Road
63 Attn: Assn. Mgmt.
64 City: Captiva Island FL 65 Zip Code: 33924

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 hereby the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] DATE: 3/16/95
Signature of typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	P/D ☒ Change ☐ Addition
NAME	WEHMANN, FREDERICK	1.2 NAME	
STREET ADDRESS	P.O. BOX 265	1.3 STREET ADDRESS	
CITY-ST-ZIP	CAPTIVA FL 33924	1.4 CITY-ST-ZIP	n/a
TITLE	PD	2.1 TITLE	V/D ☒ Change ☐ Addition
NAME	GASSER, ROBERT	2.2 NAME	Laurie, Charles R., Jr.
STREET ADDRESS	BOX 533, OGDEN DUNES	2.3 STREET ADDRESS	7000 Fitzwater
CITY-ST-ZIP	PORTAGE IN	2.4 CITY-ST-ZIP	Brecksville, OH 44141
TITLE	STD	3.1 TITLE	T/D ☒ Change ☐ Addition
NAME	LAURIE, CHARLES R. JR.	3.2 NAME	Frascati, J. Michael
STREET ADDRESS	7000 FITZWATER	3.3 STREET ADDRESS	250 Melbourne Avenue
CITY-ST-ZIP	BRECKSVILLE OH	3.4 CITY-ST-ZIP	N. Tarrytown, NY 10591
TITLE	D	4.1 TITLE	S/D ☒ Change ☐ Addition
NAME	MORIN, JANICE	4.2 NAME	Kelly, Peter
STREET ADDRESS	143 CARRIAGE RD	4.3 STREET ADDRESS	P.O. Box 891 NR
CITY-ST-ZIP	CHICOPEE MA	4.4 CITY-ST-ZIP	Sanibel Island, FL 33957 N/A
TITLE	D	5.1 TITLE	D ☒ Change ☐ Addition
NAME	GOLS, A. GEORGE	5.2 NAME	Nugent, Donald C.
STREET ADDRESS	186 CONCORD RD.	5.3 STREET ADDRESS	One Lakeside Avenue
CITY-ST-ZIP	WAYLAND MA 01778	5.4 CITY-ST-ZIP	Cleveland, OH 44113
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	REMITTED BY MAY 1
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 stated in Section 119.07(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 3/16/95 813-395-2774
SIGNATURE, ACTIVE OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Date — Daytime Phone #
Frederick Wehmann

0018484