2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717251

Entity Name: BAY COLONY CLUB CONDOMINIUM INC.

Current Principal Place of Business:

6333 BAY CLUB DR FORT LAUDERDALE, FL 33308

Current Mailing Address:

6333 BAY CLUB DR FORT LAUDERDALE, FL 33308

FEI Number: 59-1581376

Name and Address of Current Registered Agent:

STEVENS S. GOLDWYN, P.A. 2 S. UNIVERSITY DRIVE - STE. 329 PLANTATION, FL 33324 US

Certificate of Status Desired: No

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.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	TREASURER	Title	VP
Name	SHELTON, JAMES	Name	FLESHER, CHARLES
Address	6529 BAY CLUB DRIVE #2	Address	6495 BAY CLUB DRIVE #3
City-State-Zip:	FT LAUDERDALE FL 33308	City-State-Zip:	FT LAUDERDALE FL 33308
Title	PRESIDENT	Title	SECRETARY
Name	ZUBKO, SAUNDRA	Name	SOUTHWORTH, LYNDA
Address	6287 BAY CLUB DRIVE #4	Address	6297 BAY CLUB DRIVE #3
City-State-Zip:	FT LAUDERDALE FL 33308	City-State-Zip:	FT LAUDERDALE FL 33308
Title	DIRECTOR	Title	DIRECTOR
Title Name	DIRECTOR LAUTH, GEORGE	Title Name	DIRECTOR SLOTA, SAMUEL
Name	LAUTH, GEORGE 6417 BAY CLUB DRIVE #1	Name	SLOTA, SAMUEL 6311 BAY CLUB DRIVE #1
Name Address	LAUTH, GEORGE 6417 BAY CLUB DRIVE #1	Name Address	SLOTA, SAMUEL 6311 BAY CLUB DRIVE #1
Name Address City-State-Zip:	LAUTH, GEORGE 6417 BAY CLUB DRIVE #1 FT LAUDERDALE FL 33308	Name Address City-State-Zip:	SLOTA, SAMUEL 6311 BAY CLUB DRIVE #1 FT LAUDERDALE FL 33308
Name Address City-State-Zip: Title	LAUTH, GEORGE 6417 BAY CLUB DRIVE #1 FT LAUDERDALE FL 33308 DIRECTOR	Name Address City-State-Zip: Title	SLOTA, SAMUEL 6311 BAY CLUB DRIVE #1 FT LAUDERDALE FL 33308 PROPERTY MANAGER
Name Address City-State-Zip: Title Name	LAUTH, GEORGE 6417 BAY CLUB DRIVE #1 FT LAUDERDALE FL 33308 DIRECTOR THOMSEN, JAY	Name Address City-State-Zip: Title Name	SLOTA, SAMUEL 6311 BAY CLUB DRIVE #1 FT LAUDERDALE FL 33308 PROPERTY MANAGER JORGENSON, CJ W

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CJ JORGENSON

PROPERTY MANAGER 02/24/2016

Electronic Signature of Signing Officer/Director Detail

FILED Feb 24, 2016 Secretary of State CC9590885988

Date