

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770924

Entity Name: MARINA CONDOMINIUM AT BAY HILL, INC.**Current Principal Place of Business:**6511 PINECASTLE BLVD
ORLANDO, FL 32809**Current Mailing Address:**P O BOX 568846
ORLANDO, FL 32856-8846**FEI Number:** 59-2587161**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WOLTER, PAMELA R
6511 PINECASTLE BLVD
ORLANDO, FL 32809 US*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_____
Date**Officer/Director Detail :**

Title	P
Name	SAUNDERS, ROY
Address	9000 BAY HILL BLVD.
City-State-Zip:	ORLANDO FL 32819

Title	TREASURER
Name	KELLEY, JOHN
Address	6302 MASTERS BLVD.
City-State-Zip:	ORLANDO FL 32819

Title	VP
Name	LAVOIE, ROBERT
Address	6360 MASTER BLVD
City-State-Zip:	ORLANDO FL 32819

Title	DIRECTOR
Name	GILES, HOWARD
Address	6338 MASTERS BLVD.
City-State-Zip:	ORLANDO FL 32819

Title	SECRETARY
Name	VEHLEWALD, MARY B
Address	6352 MASTERS BLVD
City-State-Zip:	ORLANDO FL 32819

Title	DIRECTOR
Name	MELLEN, ROBERT
Address	6304 MASTERS BLVD
City-State-Zip:	ORLANDO FL 32819

Title	DIRECTOR
Name	SINTOW, RODERICK L
Address	6358 MASTERS BLVD
City-State-Zip:	ORLANDO FL 32819

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: ROY SAUNDERS**PRESIDENT****02/28/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date