


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005 8:00 am
Secretary of State

04-08-2005 90055 028 ***150.00

DOCUMENT # 172127

1. Entity Name
BAHIA VISTA CLUB, INC.



Principal Place of Business
**3037 HARBOR DRIVE
 FT. LAUDERDALE, FL 33316**

Mailing Address
**6915 TAFT ST
 HOLLYWOOD, FL 33024**

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country



04012005 Chg-P CR2E034 (10/03)

4. FEI Number
59-0758905

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**USA SERVICES
 6915 TAFT STREET
 HOLLYWOOD, FL 33024**

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
(Signature, typed or printed name of registered agent or not applicable) (NOTE: The agent of agent organization is printed in parentheses) (Date)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$850.00

9. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	TAPLEY, THOMAS	
STREET ADDRESS	3037 HARBOR DRIVE #13	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316	
TITLE	VD	<input type="checkbox"/> Delete
NAME	HILL, TED	
STREET ADDRESS	3037 HARBOR DRIVE #5	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316	
TITLE	D	<input type="checkbox"/> Delete
NAME	TRESCA, HELEN	
STREET ADDRESS	3037 HARBOR DR. #14	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316	
TITLE	D	<input type="checkbox"/> Delete
NAME	HEISTER, FRANK	
STREET ADDRESS	3037 HARBOR DR 16	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316	
TITLE	D	<input type="checkbox"/> Delete
NAME	GRAVINI, GARY	
STREET ADDRESS	3037 HARBOR DRIVE, #2	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments.

SIGNATURE: Thomas G. Tapley **Thomas G. Tapley** 4-4-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR