FILE NOW: FILING FEE AFTER MAY 1 IS \$550 00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORTIONS

1997

DOCUMENT # 467448

(7)

BAY HARBOR CONSTRUCTION & POOLS, INC.

Principal Plac 7735 WESTMO SARASOTA FL US		Mailing Address 7735 WESTMORELAND DR. SARASOTA FL 34243-1937 US			-				
						 Date Incorporated or Qualified 01/14/1975 		ate of Last F 24/1996	leport
2. Principal F	Place of Business	2a. Mailing Address			***	4. FEI Number	1 4.7		oplied For
21		26			t	65-0177510			ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required				
City & Sta	re	City & State				6. Election Campaign Financing			May Be
7 (0	Country	Z _I p	Cou	intry		Trust Fund Contribution			to Fees
24			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				10. Name and Address of New Ro	gistered	Agent	
COS	STAS, VAN D.			81	Name				
	5 Westmoreland Dr. Vasota florida FL 34243				Street Addr	ress (P.O. Box Number is Not Acceptable)			
• • • • • • • • • • • • • • • • • • • •				83		PROPERTY - 1914		***************************************	
				84	City			85 Zip	Code
					·		FL	.	
SIGNATURE	to the provisions of Sections 607 0502 registered agent, or both, in the State of am familiar with, and accept the obligation of registered agents.	an tipe it applicable (NO	TE: Registere			red when reinstaling)	DATE	-9x	
12.	OFFICERS AND	DELETE	13.	T) E		ADDITIONS/CHANGES TO OFFI	JEHS AND	DIRECTOR Change	S IN 12 Addition
NAME	COSTAS,VAN D.	C) bettere	1.2 N					L. Change	LI MOUIION
STREET ADORESS	7735 WESTMORELAND DRIVE				ADDRESS				
City-St-2iP	SARASOTA FL			ITY S	1				
TITLE	SV	DELETE	2.1 1		,			Change	Addition
NAME	COSTAS,LOU NELL		2.2 N	AME					
STREET ADORESS	7735 WESTMORELAND DRIVE		2.3 S	TREET	ADDRESS				
CITY-S1-ZIP	SARASOTA FL		2.40	ITY-S	ST-ZIP				
TITEF	T COLORE WILLY C	DELETE	3.1 TI	TLE				☐ Change	Addition
NAMŁ	SCHOTT, KELLY C.		3.2 N	AME					ļ
STREET ADDRESS	5773 BRITANNIA DR		3.3 \$	TREET	ADDRESS				
CHY-ST-ZIP	SARASOTA FL	T po str			57 - ZIP			T-1 a	
TITLE		L_I DELETE	4.1 TI		1			Change	Addition
NAME DEBET ADERES			4.2 N						
STHEET ADDRESS			1		ADDRESS				ļ
CHY-ST-7IP TITLE		DELETE	4.4 CI 5.1 TI		1 - ZIP			Change	Addition
NAME		C Detrie	5.2 N					- Change	L_J roditor
STREET ADDRESS			i i		ADDRESS				
City - ST - 7iP			5.4 CI						
TIFLE		☐ DELETE	5.4 CI		1-21			Change	Addition
NAME		<u>—</u> ·	6.2 N						
STREET ADDRESS					ADDRESS				
Eth Cran			0.0 0						

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DETECTOR

2.2.8-97

FILED

Mar 04 1997 8:00am

Secretary of State

- I INTERN BERNA BEREIT BEREIT GEBEN WERDE HARRE DER IN DER HER BEREIT BEREIT BEREIT BEREIT DER IN DER FERBEIT