## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Aug 13, 2009 **DOCUMENT#714766** Secretary of State

Entity Name: BAY HILL PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:** New Principal Place of Business:

7575 DR PHILLIPS BLVD 13350 WEST COLONIAL DR

SUITE 155 SUITE 330

ORLANDO, FL 32819 WINTER GARDEN, FL 34787 US

**Current Mailing Address:** New Mailing Address:

7575 DR PHILLIPS BLVD PO BOX 783367

WINTER GARDEN, FL 34778 SUITE 155 US ORLANDO, FL 32819 US

FEI Number: 59-2503953 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

SHORT, HOUSTON E SOLOMON, SPENCER 280 W. CANTON AVENUE 13350 WEST COLONIAL DR WINTER GARDEN, FL 34787 US STE 410

WINTER PARK, FL 32790 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: SPENCER SOLOMON 08/13/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition Name:

MARTIN, AMY MRS MARVIN, AMY Name: 5901 MASTERS BLVD. Address: 5901 MASTERS BLVD. Address: City-St-Zip: ORLANDO, FL 32819 City-St-Zip: ORLANDO, FL 32819

Title: Title: (X) Change ( ) Addition ( ) Delete BREWER, PHILLIP BREWER, PHILLIP MR Name: Name:

Address: 9162 BAY HILL RD Address: 9162 BAY HILL RD City-St-Zip: ORLANDO, FL 32813 City-St-Zip: ORLANDO, FL 32813

Title: TRS () Delete Title: STD (X) Change ( ) Addition

BLATT, RUSSELL MR. BLATT, RUSSELL Name: Name: 6262 INDIAN MEADOW 6262 INDIAN MEADOW Address: Address: City-St-Zip: ORLANDO, FL 32819 City-St-Zip: ORLANDO, FL 32819

Title: VΡ ( ) Delete Title: VPD (X) Change ( ) Addition

Name: COLBERT, MURIEL MRS. Name: HAMMAR, LESLEY 8997 LE VALLEY CT. Address: Address: 6105 ORANGE HILL CT City-St-Zip: ORLANDO, FL 32819 City-St-Zip: ORLANDO, FL 32819

Title: () Delete Title: () Change () Addition

KORZEP, STANLEY MR Name: Name: 5634 MASTERS BLVD. Address: Address: City-St-Zip: ORLANDO, FL 32819 City-St-Zip:

Title: () Delete Title: () Change () Addition

WALL, DAVID MR Name: Name: Address: 6283 INDIAN MEADOW Address: ORLANDO, FL 32819 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SPENCER SOLOMON RΑ 08/13/2009

Electronic Signature of Signing Officer or Director

Date