2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2007
Secretary of State

DOCUMENT# 718170

Entity Name: THE BATH CLUB, INC.

Current Principal Place of Business:

5937 COLLINS AVE
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

Current Mailing Address:

5937 COLLINS AVE
MIAMI BEACH, FL 33140 US

New Mailing Address:

FEI Number: 59-0156860 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HELMAN, JAMES R
5937 COLLINS AVE
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: JAMES R HELMAN,
Address: 5201 LA GORCE DR
City-St-Zip: MIAMI BCH, FL

Title: D ( ) Delete
Name: SETLIN, HOWARD
Address: 1717 N. BAYSHORE, SUITE 3433
City-St-Zip: MIAMI, FL 33132

Title: D ( ) Delete
Name: QUINTON, EDWARD
Address: 457 NE 95 ST
City-St-Zip: MIAMI SHORES, FL 33138

Title: D (X) Delete
Name: KELLEY, ALLEN
Address: 720 NE 101 ST
City-St-Zip: MIAMI SHORES, FL 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: HELMAN, JAMES R
Address: 5201 LA GORCE DR
City-St-Zip: MIAMI BCH, FL 33140

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: GILLELAND, CAROLYN
Address: 5661 PINE TREE DRIVE
City-St-Zip: MIAMI BEACH, FL 33140

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES R HELMAN PD 03/14/2007

Electronic Signature of Signing Officer or Director — Date