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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 732569

1. Corporation Name

BAHIA BEACH YACHT CLUB, INC.

Principal Place of Business

P.O. BOX 846
RUSKIN FL 33570

Mailing Address

P.O. BOX 846
RUSKIN FL 33570



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

04/25/1975

4. FEI Number

59-1607988

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

FRICK, FRANCES
804 LEISEY CIRCLE S.W.
RUSKIN FL 33570

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P BOWDITCH, BENSON
4019 EAGLE NEST DR
APOLLO BEACH FL

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VP GENGLER, JUDY
3301 SEAGRAPE DR
RUSKIN FL

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

T FRIEN, FRANCES
804 LEISEY CIRCLE SW
RUSKIN FL

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D SELTORNE, THOS
404 STONEHAM DR
RUSKIN FL

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D GENGLER, ALAN
3301 SEA GRAPE DR
RUSKIN FL

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

S MURPHY, BRENDA
4019 EAGLE NEST DR
APOLLO BEACH FL

DELETE

13. ADDITIONS/CHANGES TO OFFICER AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

(P) HOWARD MURPHY
APOLLO BEACH FL

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

(S) SANDRA BULLARD
VALRICO FL

14. I 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Frances Frick 4/11/99
Date Daytime Phone #

CR2E037 (11/98)