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May 05, 1999 8:00 am
Secretary of State

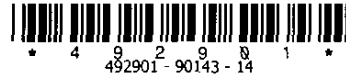
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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 747070

1. Corporation Name
CLUB OF BAY HARBOR CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 1120 99 STREET BAY HARBOR ISLAND FL 33154	Mailing Address 1120 99 STREET BAY HARBOR ISLAND FL 33154
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 05/07/1979
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1948743
City & State 23	City & State 28	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
Country 29	Country 30	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
NEITERMAN, BERTRAM 1120 99TH ST. #502 BAY HARBOR ISLANDS FL 33154		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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME NEITERMAN, BERTRAM		1.2 NAME	
STREET ADDRESS 1120 99TH ST, #502		1.3 STREET ADDRESS	
CITY-ST-ZIP BAY HRBR ISLANDS FL 33154		1.4 CITY-ST-ZIP	
TITLE VD	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FERRES, CARLOS		2.2 NAME	VD TORRES CARLOS
STREET ADDRESS 1120 99TH ST, #402		2.3 STREET ADDRESS	1120 99th St #402
CITY-ST-ZIP BAY HRBR ISLANDS FL 33154		2.4 CITY-ST-ZIP	BAY HADR ISLANDS, FL 33154
TITLE D	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MILLER, A. BERTRAM		3.2 NAME	
STREET ADDRESS 1120 99TH ST, #203		3.3 STREET ADDRESS	
CITY-ST-ZIP BAY HRBR ISLANDS FL 33154		3.4 CITY-ST-ZIP	
TITLE D	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PUHEL, SARAH		4.2 NAME	
STREET ADDRESS 1120 99TH ST, #303		4.3 STREET ADDRESS	
CITY-ST-ZIP BAY HRBR ISLANDS FL 33154		4.4 CITY-ST-ZIP	
TITLE S	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME KLEIN, LILLIAN		5.2 NAME	
STREET ADDRESS 1120 99TH ST, #404		5.3 STREET ADDRESS	
CITY-ST-ZIP BAY HARBOR ISLANDS FL 33154		5.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME RODRIGUEZ, BERTHA		6.2 NAME	D RODRIGUEZ, Bertha
STREET ADDRESS 1120 99th St, #304		6.3 STREET ADDRESS	1120 99th St #304
CITY-ST-ZIP BAY HRBR ISLANDS, FL 33154		6.4 CITY-ST-ZIP	Bay Harbor Islands, FL 33154

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: *B. Neiterman* President 4-29-99

CR2E037 (11/98)