


FILE NOW: FILING FEE IS \$61.25

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Jul 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **755336** (5)
1. Corporation Name
BAHIA EAST CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 1288 MARLER DRIVE FT WALTON BCH FL 32548	Mailing Address 1288 MARLER DRIVE FT WALTON BCH FL 32548
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 12/02/1980	4. FEI Number 59-2213804	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent W.S. MCKNIGHT 1288 MARLER DRIVE #15 FT WALTON BCH FL 32548	
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10. Name and Address of New Registered Agent	
81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 *W.S. McKnight* DATE **13 MAY 1998**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	JACK HOPPER
STREET ADDRESS	5564 HWY 55 EAST
CITY-ST-ZIP	EVA AL 35621
TITLE	VPD <input type="checkbox"/> DELETE
NAME	W.S. MCKNIGHT
STREET ADDRESS	1288 MARLER DRIVE
CITY-ST-ZIP	FT. WALTON BEACH FL 32548
TITLE	SD <input type="checkbox"/> DELETE
NAME	WILLIAM C NAFTEL II
STREET ADDRESS	14 MISTY WATER LANE
CITY-ST-ZIP	MARY ESTHER FL 32569
TITLE	TD <input type="checkbox"/> DELETE
NAME	TERRY S. TAYLOR
STREET ADDRESS	1288 MARLER DR #8
CITY-ST-ZIP	FT. WALTON BEACH FL 32548
TITLE	D <input type="checkbox"/> DELETE
NAME	THEODORE CASON
STREET ADDRESS	310 EAST 4TH AVE
CITY-ST-ZIP	FLORALA AL 36442
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	AL FRIEBERG - PRES - DIRECTOR
1.3 STREET ADDRESS	6004 VOGEL COURT
1.4 CITY-ST-ZIP	Mobile AL 36693
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	W.S. MCKNIGHT VP - DIRECTOR
2.3 STREET ADDRESS	1288 MARLER AVE #16
2.4 CITY-ST-ZIP	FW.B, FL 32548
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	ROBERT WALLACE - SEC - DIRECTOR
3.3 STREET ADDRESS	550 MAIN AVE SUITE 825
3.4 CITY-ST-ZIP	KNOXVILLE TN 37902
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	CHUCK BOLTON - TREAS - DIRECTOR
4.3 STREET ADDRESS	1288 MARLER AVE #12
4.4 CITY-ST-ZIP	FT WALTON BEACH, FL 32548
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	JACK HOPPER - DIRECTOR
5.3 STREET ADDRESS	5564 HWY 55 EAST
5.4 CITY-ST-ZIP	EVA, AL 35621
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

SIGNATURE *W.S. McKnight*

CR2E037 (10/97)