FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999

BAL HARBOUR FL 33154



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Mar 22, 1999 8:00 am § Secretary of State

03-22-1999 90022 004 ****70.00

DOCUMENT # 768740

BAL HARBOUR CLUB, INC.						:		
	•				·	•		
Principal Place of Business	Mailing Address	Mailing Address						
10201 COLLINS AVENUE BAL HARBOUR FL 33154 US	10201 COLLINS AVENUE BAL HARBOUR FL 33154 US							
Principal Place of Business [21]	2a. Mailing Address				3. Date Incorporated or Qualifed 07/15/1946			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	·		L	4. FEI Number 59-0580020		Applied For Not Applicab	
City & State	City & State				5. Certificate of Status Desired		.75 Additional ee Required	
Zip Country 24 25	Zíp 29 30	Count	ountry		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
		8	1	Name				
DIFRISCO, PEGGY		8	2	Street Addre	ess (P.O. Box Number is Not Acceptable)	·		

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

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office or re agent. I a	egistered agent, or both, in the State of Florida. Such change wa m familiar with, and accept the obligations of, Section 617.0503,	Florida Statutes.	oracion's board of directors. Thereby accept the appoin	,	
SIGNATURE	William Berkham, PNB	3	3/10/	9 9	
	cignature, types of printer and a second sec	IOTE: Registered Agent signature :		D DIRECTO	30 IN 43
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	PD DELETE	1,1 TTTLE	•	☐ Change	☐ Addition
NAME	BECKHAM, WILLIAM	1.2 NAME			
STREET ADDRESS	247 BAL BAY DR	1.3 STREET ADDRESS			
CITY-ST-ZIP	BAL HARBOUR FL	1.4 CITY-ST-ZIP		vv-	
TITLE	VPAS □ DELETE	2.1 TITLE	VPAS	4 Change	☐ Addition
NAME	CASTELLANO, WILLIAM	2.2 NAME	COONEY, ELAINE		
STREET ADDRESS	138 PARK DR	2.3 STREET ADDRESS	174 CAMDEN DRIVE	•	
CITY-ST-ZIP	BAL HARBOUR FL	2.4 CITY-ST-ZIP	BAL HARBOUR, FL 33154		
TITLE	SD DELETE	3.1 TITLE	SD	XX Change	☐ Addition
NAME	JOHNSON, CHARLES	3.2 NAME	GRONDIN, PIERRE		
STREET ADDRESS	10205 COLLINS AVE	3.3 STREET ADDRESS	107 BAL CROSS DRIVE	:	
CITY-ST-ZIP	BAL HARBOUR FL	3.4. CITY+ST-ZIP	BAL HARBOUR, FL 33154		
TITLE	TD DELETE	4.1 TITLE	-	☐ Change	☐ Addition
NAME	MOSTEIRO, MANUEL	4, 2 NAME	,		
STREET ADDRESS	10205 COLLINS AVE	4.3 STREET ADDRESS			
CITY-ST-ZIP	BAL HARBOUR FL	4.4 CITY-ST-ZIP			
TITLE	☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS		•	
CITY-ST-ZIP		5.4 CITY-ST-ZIP		· <u></u>	
TITLE	DELETE	6.1 TITLE		Change	☐ Addition
NAME	To get the second second	6.2 NAME		*,	,
STREET ADDRESS		6.3 STREET ADDRESS			
CITY OF TIP	•	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, with all other like empowered.

SIGNATURE:

305 866-1687

Applied For Not Applicable

Zip Code

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