FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K66665** **(6)**

1. Corporation Name

BAY HILL ATHLETIC CLUB, INC.

Principal Place of Business	Mailing Address
4732-A S. KIRKMAN RD. ORLANDO FL 32811 US	280 ST. RD 434 #1049 ALTAMONTE SPRINGS FL 32714 US

3. Date Incorporated or Qualified: **02/16/1989**
3a. Date of Last Report: **03/14/1995**

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: **59-2943021** ☐ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PALLUCK, BERNARD F.
102 SWEETWATER CLUB BLVD.
LONGWOOD FL 32779

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE (Signature required only when name of registered agent is being changed) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VP	☐ DELETE	1.1 TITLE	5	☑ Change ☐ Addition
NAME	PALLUCK, BERNARD F		1.2 NAME	MACEACHIN, WENDY	
STREET ADDRESS	102 SWEETWATER CLUB BLVD		1.3 STREET ADDRESS	6118 GAMBLE DR.	
CITY-ST-ZIP	LONGWOOD FL		1.4 CITY-ST-ZIP	ORLANDO, FL 32808	
TITLE	S	☐ DELETE	2.1 TITLE	VP	☑ Change ☐ Addition
NAME	MAREACHIN, WENDY		2.2 NAME	MACEACHIN, MARESSA	
STREET ADDRESS	458 VINERIDGE RUN 10305		2.3 STREET ADDRESS	8303 GHELSWORTH DR.	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL		2.4 CITY-ST-ZIP	ORLANDO, FL 32835	
[redacted]	[redacted]	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	PALLUCK EDDIE M.		3.2 NAME		
STREET ADDRESS	102 SWEETWATER CLUB BLVD		3.3 STREET ADDRESS		
CITY-ST-ZIP	LONGWOOD FL		3.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	JOHNSON, KIM		4.2 NAME		
STREET ADDRESS	567 GARDEN HEIGHTS DR		4.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER GARDEN FL		4.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	MARESSA MACEACHIN		5.2 NAME		
STREET ADDRESS	8531 ROSE GROVES RD		5.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32818		5.4 CITY-ST-ZIP		
TITLE	TRES	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	LISA BOUCHARD		6.2 NAME		
STREET ADDRESS	1162-A PASEO DEL MAR		6.3 STREET ADDRESS		
CITY-ST-ZIP	CASSELBERRY FL 32707		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or added in an attachment with an address.

SIGNATURE: Bernard F Palluck EX V Pres 2-13-96 407-788-8859

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)