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Mar 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

4732-A S. KIRKMAN RD.
ORLANDO FL 32811
US

Mailing Address

280 ST. RD 434
#1049
ALTAMONTE SPRINGS FL 32714-3859
US

3. Date Incorporated or Qualified

02/16/1989

3a. Date of Last Report

02/22/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VP
NAME PALLUCK, BERNARD F
STREET ADDRESS 102 SWEETWATER CLUB BLVD
CITY- ST- ZIP LONGWOOD FL

☐ DELETE

TITLE S
NAME MAREACHIN, WENDY
STREET ADDRESS 6118 GAMBLE DRIVE
CITY- ST- ZIP ORLANDO FL

☐ DELETE

TITLE P
NAME PALLUCK EDDIE M.
STREET ADDRESS 102 SWEETWATER CLUB BLVD
CITY- ST- ZIP LONGWOOD FL

☐ DELETE

TITLE VP
NAME JOHNSON, KIM
STREET ADDRESS 587 GARDEN HEIGHTS DR
CITY- ST- ZIP WINTER GARDEN FL

☒ DELETE

TITLE VP
NAME MARESSA MACEACHIN
STREET ADDRESS 8203 CHELSWORTH DRIVE
CITY- ST- ZIP ORLANDO FL

☐ DELETE

TITLE TRES
NAME LISA BOUCHARD
STREET ADDRESS 1162-A PASEO DEL MAR
CITY- ST- ZIP CASSELBERRY FL 32707

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V.P. ☐ Change ☒ Addition

1.2 NAME CAROL WILLIAMS
1.3 STREET ADDRESS 1440 ANDERSON ST.
1.4 CITY- ST- ZIP DELTONA, FL 32785

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME LISA HEARON
6.3 STREET ADDRESS 1162-A PASEO DEL MAR
6.4 CITY- ST- ZIP CASSELBERRY, FL 32707

14. I do 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 person or persons 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 on an addition with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

BERNARD F PALLUCK 3-3-97 407 788-8859

CR2E034 (9/96)