FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

1162-A PASEO DEL MAR

CASSELBERRY FL

FILED PROFIT FLORIDA DEPARTMENT OF STATE Jan 30 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 **DIVISION OF CORPORATIONS** DOCUMENT # K66665 (6)BAY HILL ATHLETIC CLUB. INC. Principal Place of Business Mailing Address 4732-A S. KIRKMAN RD. 280 ST. RD 434 ORLANDO FL 32811 #1049 ALTAMONTE SPRINGS FL 32714 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/16/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2943021 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zìp Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 PALLUCK, BERNARD F. 102 SWEETWATER CLUB BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) LONGWOOD FL 32779 83 84 City Zip Code 85 F 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 OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 € VP TITLE DELETE 1.1 TITLE Change Addition PALLUCK, BERNARD F NAME 1,2 NAME 102 SWEETWATER CLUB BLVD STREET ADDRESS 1,3 STREET ADDRESS LONGWOOD FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE Change 2.1 TITLE Addition MAREACHIN, WENDY JEMKINS, WENDY NAME 2.2 NAME STREET ADDRESS 6118 GAMBLE DRIVE 2.3 STREET ADDRESS ORLANDO FL CITY - ST - ZIP 2, 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition PALLUCK EDDIE M. NAME 3.2 NAME 102 SWEETWATER CLUB BLVD STREET ADDRESS 3.3 STREET ADDRESS LONGWOOD FL CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE ☐ Change Addition WILLIAM, CAROL NAME 4. 2 NAME 1440 ANDERSON ST. STREET ADDRESS 4.3 STREET ADDRESS DELTONA FL CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETÉ Change 7 ITIT 5.1 TITLE Addition PAHN, MARESSA MARESSA MACEACHIN NAME 5.2 NAME 8203 CHELSWORTH DRIVE STREET ADDRESS 5.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE ___ Change Addition HEARON, LISA NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-7IP

14. I hereby certify that the information supplied with this filling deed 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 factors 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 received in the 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 additional statutes. MAN DOATH