

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 28 PM 2:35

DOCUMENT # L54148 (6)

1. Corporation Name

BAY AREA BEACH CLUB TANNING CENTER, INC.

Principal Place of Business

1725 W. FLETCHER AVE.
TAMPA FL 33612

Mailing Address

1725 W. FLETCHER AVE.
TAMPA FL 33612

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/27/1990

3a. Date of Last Report

11/14/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

65-0184974

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$6.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

10. Name and Address of New Registered Agent

POTERLSKI, RANDY J.
1725 W. FLETCHER AVENUE
TAMPA FL 33612

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 of person or principal officer or registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

3-23-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PST
NAME	POTERLSKI, RANDY
STREET ADDRESS	11500 N. DALE MABRY #112
CITY-ST-ZIP	TAMPA FL
TITLE	D
NAME	POTERLSKI, RANDY
STREET ADDRESS	3401 W. LAKEWOOD DR.
CITY-ST-ZIP	TAMPA FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1.1 TITLE	PRESIDENT	☒ Change ☐ Addition
1.2 NAME	RANDY J. POTERLSKI	
1.3 STREET ADDRESS	1725 WEST FLETCHER AVENUE	
1.4 CITY-ST-ZIP	TAMPA, FLORIDA 33612	
2.1 TITLE	SECRETARY/TREASUROR	☒ Change ☐ Addition
2.2 NAME	LISA M. POTERLSKI	
2.3 STREET ADDRESS	1725 WEST FLETCHER AVENUE	
2.4 CITY-ST-ZIP	TAMPA FLORIDA 33612	
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		
6.3 STREET ADDRESS		
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 110.07(3)(k), 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RANDY J. POTERLSKI
PRESIDENT

DATE

3-23-95 813-264-0151