FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9500005481 (5)

BAHAMA BAY CLUB CONDOMINIUM ASSOCIATION, INC

	TA BAY GLUB GUNDUMINI										
Principal Place of Business 1121 SWALLOW AVENUE MARCO ISLAND FL 33937			Mailing Address								
			719 S.W. 47TH TERRACE #201 Cape Coral FL 33914-6565					3. Date Incorporated or Qua	ified [3a, [Date of Last R	epori
								11/17/1995		08/20/19	96 `
2. Principal P	lace of Business	28.	Mailing Address	. /				4. FEI Number	CE NOW	Ar	oplied For
21		26	7736 Jewe	2 ha	NC	<u> </u>		MHEED TON	5-0691		t Applicable
Suite, Apt.	#, etc		Suite, Apt. #, etc. Apr # 102	_				5. Certificate of Status Desire	ed 🔲	\$8.75 / Fee Re	
City & Stale	n	27	City & State	·				6. Election Campaign Finance	ina	\$5.00	
23	Ÿ	28	NAPLYS, F	ī				Trust Fund Contribution	"" ["] 🔲	Added i	
Zιρ	Country		Zip		uniry	^ ~		8. This corporation has liabili	ty for intangib	le tax under s	199.032,
24	25	29	FL	30	ŞŞ	142		Florida Statutes		□ No	
	9. Name and Address of Currer	it Regis	tered Agent		¥ 4	105	,	10. Name and Address of No	w Registered	i Agent	
					81	Name					
AMATO, LOUIS X					82 Street Address (P.O. Box Number is Not Accepta						
•	TH AVENUES., SUITE 200				83				· · · · · · · · · · · · · · · · · · ·		
NAPLES	FL 33940										
					84	City			F	85 Zip (Code
11. Pursuant	to the provisions of Sections 617.050	2 and 6	17.1508, Florida Stat	utes, the a	baye	-named	corpor	ration submits this statement fo	the purpose	of changing it	s registered
office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	of Floridations of	da. Such change was f. Section 617.0503. I	s authorize Florida Sta	ed by stutes	the corp	poration	n's board of directors. I hereby	accept the ap	pointment as	registered
SIGNATURE			,		.,_,_						
SIGIVATORE .	Signature, typed or printed name of registered age					nt signature	required	when reinstating)	DATE		
12.	OFFICERS AN	D DIREC		13.			MZ.	ADDITIONS/CHANGES TO	OFFICERS AN		
TITLE	PSTD CHOISTIAN VON		☐ DELETE		ITLE		Par	eno. CHRISTAN II	W	Change Change	☐ Addition
NAME CAREET ARRESTOR	BESSER, CHRISTIAN VON 719 S.W. 47TH TERRACE, #	201			AME	1 D D D C C C	338	JOHN LANG # N) <u>}</u>		
STREET ADDRESS	CAPE CORAL FL 33914	ÇU I		. i				WE, RORDA 34	-9		
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NAME	GRIES, NADINE		Lad becen		IAME						
SIREET ADDRESS	STEIN STR. 2, 63825 SCHOOL	LLKRIP	PEN			ADDRESS					
CITY-ST-ZIP	GERMANY				CITY-S						
TITLE	D		DELETE	3.1 7			D	.1		Change	Addition
NAME	GRIES, GRIES			3.2 8	NAME		BRI	es, Heino Mare 2,68825 S		(D . AG = =:	,
STREET ADDRESS	STEIN STR. 2, 63825 SCHOR	LLKRIF	PPEN	3.3 9	STREET	ADDRESS	678	Mark's loopud c	/////////////////////////////////////	HITTON	1
CITY - ST - ZIP	GERMANY				CITY-S	IT-ZIP	60	emmy			
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NAME				4.2	NAME						
STREET ADDRESS				4.3 \$	STREET	address					
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CITY-ST-ZIP	 	++	☐ DELETE		CITY-S	1 - ZIP	 			Change	Addition
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STREET ADDRESS		N	<u> </u>			ADDRESS	ĺ				
STREET ADDRESS	 	`	\mathcal{N}	0.33	NTV O	**************************************		h			

SIGNATURE:

14. I do hereby certify that the information indicated on this aline. I am an officer or director of the cappears in Block 12 or Block 13.

TURE INC. TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

02/21/92 94/594-9686

19.07(3)(i), Florida Statutes. I further certify that the e shall have the same legal effect as if made under oath; that by Chapter 617, Florida Statutes; and that my name

FILED

Apr 03 1997 8:00am

Secretary of State