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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000069910 (6)

APOLLO BAYSIDE MANAGEMENT CORP.

Principal Place of Business

Mailing Address

FILED Mar 27 1998 8:00am Secretary of State



MRAMADA BAYSIDE INN & RESORT 8414 SURSIDE BLVD APOLLO BEACH FL 33572 US		758 SOUTH AVENU	% MIDLAND MANAGEMENT. LTD. 758 SOUTH AVENUE ROCHESTER NY 14620			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/06/1993		
2. Principal Pla	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	Applied For	
21		26				59-3705312	Not Applicable	
Suite, Apt. e	#, e1c.	Suite, Apt. #, etc	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	Country 25	Zip 29	29 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
	9. Name and Address of Cur	rent Registered Agent		1		10. Name and Address of New Registered	Agent	
BAILIN, LAWRENCE J				61	Name			
Stearns, Weaver, Miller, Weissler, et al 401 E. Jackson Street, Suite 2200						ress (P.O. Box Number is Not Acceptable)		
TAN	IPA FL 33602			63				
•	•		Ì	84	City	FL	85 Zip Code	
11. Pursuant to office or reagent. I ar SIGNATURE	o the provisions of Sections 607.6 egistered agent, or both, in the St in familiar with, and accept the ob-	0502 and 607.1508, Florida sate of Florida Such change obligations of, Section 607.050	Statutes, the ab was authorized 05, Florida Statu	ove-r l by tl ales.	named corp he corporati	poration submits this statement for the purpose of Jion's board of directors. I hereby accept the app	changing its registered ointment as registered	
Oldiff (Toric	Si gnat ure, typed or printed name of registered	agent and title if applicable	(NOTE: Registered	Agent	signature require	red when reinstaling) DATE		
12.	OFFICERS :	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND		
TITÉE	U LIONATT MACK IN	☐ DELET					Change L Addition	
NAME	HOWITT, JACK W		1.2 NA	ME				
STREET ADDRESS	% 758 SOUTH AVENUE		1.3 STF	REET AC	DDRESS			
CITY-S1-ZIP	ROCHESTER NY			Y-S1	ZIP		The same that the same same same same same same same sam	
TITLE	LANDOMAN PLACET			2.1 TITLE			Change Addition	
NAME	3 TOWNLINE CIRCLE			22 NAME				
STREET ADDRESS	ROCHESTER NY				DDRESS			
CiTY-ST-ZIP TITLE	1001E01E11 III	L DELE	2.4 CF E 3.1 TH		-ZIP		Change Addition	
Ţ		L., Ditt						
NAME STREET ADDRESS			32 NA		DDRESS			
CITY-ST-ZIP			34. CI					
TITLE	·	DELET			EII .		Change Addition	
NAME			4 2 NA					
STREET ADDRESS			4.3 STF	REET AC	DDRESS		Ì	
CITY-ST-ZIP			4.4 CIT	Y-ST-	ZIP			
TITLE		☐ DELET				:	Change Addition	
NAME			5.2 NA	ME	·	•	75	
STREET ADDRESS			5 3 STF	REET AC	DDRESS		الدكروي	
CITY-ST-ZIP			5.4 C(T	Y-ST-	ZIP		341	
TITLE		☐ DELET	€ 61 TIT	LE		60000247153 -03/30/980100403	⊞ O hange	
NAME			6.2 NA	ME		-03/30/980100401	15	
STREET ADDRESS			6.3 STF	REET AC	DDRESS	***150.00		
CITY-ST-78P			6.4 C/T	Y-ST-	ZIP		-	

14. Thereby 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 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.