## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 770823** 

Entity Name: BAC BAY HEALTH AND RACQUET CLUB CONDOMINIUM

ASSOCIATION, INC.

## **Current Principal Place of Business:**

C/O MYTOWN COMMUNITIES 2830 WINKLER AVE 101 FORT MYERS, FL 33916

## **Current Mailing Address:**

C/O MYTOWN COMMUNITIES 2830 WINKLER AVE 101 FORT MYERS, FL 33916 US

FEI Number: 90-0014341 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KELLOGG, CODY L C/O P & M PROPERTY MANAGEMENT 2830 WINKLER AVE 101 FORT MYERS, FL 33916 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CODY KELLOGG 05/05/2022

> Date Electronic Signature of Registered Agent

> > City-State-Zip:

Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title VP, DIRECTOR Name FIGUEROA, CANDIDO Name LEASK, LEO

Address C/O MYTOWN COMMUNITIES Address C/O MYTOWN COMMUNITIES

2830 WINKLER AVE 101 2830 WINKLER AVE 101

FORT MYERS FL 33916 FORT MYERS FL 33916 City-State-Zip: City-State-Zip:

Title SECRETARY, TREASURER, Title **DIRECTOR** DIRECTOR

SQUIRES, LOUIS Name CAVANAUGH, SUSAN Name

C/O MYTOWN COMMUNITIES Address Address C/O MYTOWN COMMUNITIES

2830 WINKLER AVE 101 2830 WINKLER AVE 101

City-State-Zip: FORT MYERS FL 33916

Title DIRECTOR

ZVANOVEC, DEBORAH Name

C/O MYTOWN COMMUNITIES Address

2830 WINKLER AVE 101

City-State-Zip: FORT MYERS FL 33916

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CANDIDO FIGUEROA

PRESIDENT

FORT MYERS FL 33916

05/05/2022

**FILED** May 05, 2022

Secretary of State

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