FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 17 PM 2:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G67588** **(5)**

1. Corporation Name
BAY YACHT CLUB, INC.

Principal Place of Business	Mailing Address
110 N.E. 3RD ST., STE. 300 FORT LAUDERDALE FL 33301	110 N.E. 3RD ST., STE. 300 FORT LAUDERDALE FL 33301

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/02/1983
3a. Date of Last Report: 03/16/1994

2. Principal Place of Business
21: 2812 E. Henrietta Road
22: Suite, Apt. #, etc.
23: City & State: Henrietta, New York
24: Zip: 14467
25: Country:

2a. Mailing Address
26: 2812 E. Henrietta Road
27: Suite, Apt. #, etc.
28: City & State: Henrietta, New York
29: Zip: 14467
30: Country:

4. FEI Number: 65-0000505 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$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

SCHECTER, MARK S.
110 N.E. 3RD ST., #300
FORT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name: Kimberly L. Glaser
82 Street Address (P.O. Box Number is Not Acceptable): 4300 N. Ocean Blvd. Unit 6H
83:
84 City: Ft. Lauderdale FL 85 Zip Code: 33308

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: Kimberly L. Glaser — 4/7/95 DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DPS	1.1 TITLE		☒ Change ☐ Addition
NAME	GLASER, KIMBERLY L.	1.2 NAME		
STREET ADDRESS	110 N.E. 3RD ST., #300	1.3 STREET ADDRESS	4300 N. Ocean Blvd. Unit 6H	
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	Ft. Lauderdale, Florida 33308	
TITLE	TV	2.1 TITLE		☒ Change ☐ Addition
NAME	GLASER, KIMBERLY L.	2.2 NAME		
STREET ADDRESS	110 N.E. 34D ST., #300	2.3 STREET ADDRESS	4300 N. Ocean Blvd. Unit 6H	
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	Ft. Lauderdale, Florida 33308	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS.		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		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 119.07(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: Kimberly L. Glaser **President** 4/7/95 (305) 561-9777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0810696 CP