


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2008 08:00 AM
Secretary of State

DOCUMENT # 383672
 1. Entity Name
BAY ASSOCIATES, INC.



Principal Place of Business 1938 HOFFNER ORLANDO, FL 32809	Mailing Address 1938 HOFFNER ORLANDO, FL 32809
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DO NOT WRITE IN THIS SPACE



01052008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1407978	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VAN DYKE, RUFUS O JR
1938 HOFFNER
ORLANDO, FL 32809

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE V	VAN DYKE, BONNIE M 1938 HOFFNER ORLANDO, FL 32809
TITLE PD	VAN DYKE, R O JR 1938 HOFFNER ORLANDO, FL 32809
TITLE SD	FRASER, ANDREA L 3051 KEEL COURT TAVARES, FL 32778
TITLE NAME	
TITLE NAME	
TITLE NAME	

U00000777200
 01/09/08-80054-011 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rufus O. Van Dyke, Jr 1/5/08 407 854-7932
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #