

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 10, 2005 08:00 AM
Secretary of State

DOCUMENT # 431041 1. Entity Name BAYSHORE ELECTRONICS, INC.	
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Principal Place of Business 7218 BROUGHTON STREET SARASOTA, FL 34243	Mailing Address 7218 BROUGHTON STREET SARASOTA, FL 34243
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DO NOT WRITE IN THIS SPACE



03012005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1492581	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MCGOUGAN, GERALD 7218 BROUGHTON ST SARASOTA, FL 34243	DO NOT WRITE IN THIS SPACE
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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 _____
Signature, typed or printed name of registered agent and title (acceptable for the Registered Agent's name and address when not changing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	PV MCGOUGAN, GERALD 7218 BROUGHTON ST SARASOTA, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	S MCGOUGAN, BARBARA 7218 BROUGHTON ST SARASOTA, FL
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03/10/05-80040-013 150.00

12. I hereby certify that the information submitted with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 I made under oath; that I am an officer or director of the corporation or the officer 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 Barbara McGougan **3/7/05 941-355-1625**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Officer Print

Barbara McGougan