

FILE NOW: FILING FEE IS \$61.25

FILED

**Feb 09 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 848310 (9)

1. Corporation Name
HAYWARD BAKER, INC.



Principal Place of Business 1875 MAYFIELD ROAD ODENTON MD 21113	Mailing Address 1875 MAYFIELD ROAD ODENTON MD 21113
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3. Date Incorporated or Qualified
02/19/1981

4. FEI Number
59-2059235

Applied For	<input type="checkbox"/>
Not Applicable	<input checked="" type="checkbox"/>

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	28 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	29 Zip Country
24	30

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

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

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	DODSON, TOM	
STREET ADDRESS	1078 FOXCROFT RUN	
CITY-ST-ZIP	ANNAPOLIS MD 21403	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	RUBRIGHT, ROBERT	
STREET ADDRESS	10036 INKPEN PLACE	
CITY-ST-ZIP	ELLICOTT CITY MD	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	WELSH, JOSEPH P.	
STREET ADDRESS	219 ST IVES DR	
CITY-ST-ZIP	SEVERNA MD	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	VANDERPOOL, R.D.	
STREET ADDRESS	10320 JOHN EAGER COURT	
CITY-ST-ZIP	ELLICOTT CITY MD	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	YALE, RICHARD N.	
STREET ADDRESS	6428 MISTY TOP PASS	
CITY-ST-ZIP	COLUMBIA MD	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Assistant Secretary
4.3 STREET ADDRESS	R.D. Vanderpool
4.4 CITY-ST-ZIP	6420 Loring Drive Columbia, MD 21945
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE _____ **Richard N. Yale, VP (410) 551-8200**

CR2E037 (10/97)