FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **L78719** **(6)**

1. Corporation Name

BAY PRINTING, INC.

Principal Place of Business	Mailing Address
434 SOUTH WASHINGTON BLVD. 2453 BEE RIDGE RD SARASOTA FL 34236	434 SOUTH WASHINGTON BLVD. 2453 BEE RIDGE RD SARASOTA FL 34236

3. Date Incorporated or Qualified: 06/05/1990	3a. Date of Last Report: 06/23/1995
4. FEI Number: 65-0203758	☐ 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	

2. Principal Place of Business
21 435 S Gulfstream Ave
Suite, Apt. #, etc.
22 Suite 207
City & State
23 Sarasota, Fl
Zip 24 34236 Country 25 Sarasota

2a. Mailing Address
26 435 Gulfstream Ave
Suite, Apt. #, etc.
27 Suite #207
City & State
28 Sarasota, Fl
Zip 29 34236 Country 30 Sarasota

9. Name and Address of Current Registered Agent

CHARLES E. PIERCE
434 SOUTH WASHINGTON BLVD.
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name: James R. Jackson
82 Street Address (P.O. Box Number is Not Acceptable): 435 S Gulfstream Ave
83 Suite 207
84 City: Sarasota FL 85 Zip Code: 34236

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: James R Jackson — James R Jackson — 02-07-96
(Signature of New Registered Agent, if changing) (Name of New Registered Agent, if changing) (Date)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DC	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BERLIN, FRANK G SR		1.2 NAME		
STREET ADDRESS	555 S GULFSTREAM AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BERLIN, FRANK G., JR.		2.2 NAME		
STREET ADDRESS	2439 BEE RIDGE ROAD		2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOT FL		2.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	PIERCE, CHARLES E.		3.2 NAME		
STREET ADDRESS	434 S WASHINGTON BLVD		3.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	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)(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Frank G Berlin, Sr. — 02-07-96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

CR2E034 (12/95)