2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2007 8:00 am
Secretary of State
01-17-2007 90054 022 ***158.75

DOCUMENT # P04000137509

1. Entity Name
BAY DEMOLITION AND CONSTRUCTION INC.

Principal Place of Business	Mailing Address
2537 SCHMIDT LN CHIPLEY, FL 32428	2537 SCHMIDT LN CHIPLEY, FL 32428

01142007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
3335 darlington drive	P.O. Box 9400
Suite, Apt. #, etc. chipley	Suite, Apt. #, etc. Panama city beach
City & State Florida	City & State Florida
Zip 32428 Country U.S.	Zip 32417 Country U.S.

4. FEI Number 20-1605463 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

A1A REGISTERED AGENT INC.
92 SADBERRY RD
QUINCY, FL 32351

7. Name and Address of New Registered Agent

Name Jimmy R. Worley
Street Address (P.O. Box Number is Not Acceptable) 3335 darlington drive
City chipley FL Zip Code 32428

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 Jimmy R. Worley 1-14-07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS WORLEY, JIMMY R 3335 DARLINGTON DR CHIPLEY, FL 32428	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT SCHMIDT, JAMES F 2537 SCHMIDT LN CHIPLEY, FL 32428	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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: Jimmy R. Worley Jimmy R. Worley, (President) 1-14-07 (850)596-7447
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #