

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # S35991

(6)

1. Corporation Name
BAYLY W. POOLE INC.



Principal Place of Business
**3164 MEDINAH CIRCLE
LAKE WORTH FL 33467**

Mailing Address
**3164 MEDINAH CIRCLE
LAKE WORTH FL 33467**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

9. Name and Address of Current Registered Agent

**POOLE, BAYLY W.
3164 MEDINAH CIRCLE
LAKE WORTH FL 33467**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Organized
03/01/1991

3a. Date of Last Report
01/31/1995

4. FEI Number
65-0255899

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

10. Name and Address of New Registered Agent

SIGNATURE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12

OFFICERS AND DIRECTORS

13

TITLE

**D
POOLE, BAYLY W.
3164 MEDINAH CIRCLE
LAKE WORTH FL**

DELETE

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

15 TITLE

16 NAME

17 STREET ADDRESS

18 CITY, ST, ZIP

19 TITLE

20 NAME

21 STREET ADDRESS

22 CITY, ST, ZIP

23 TITLE

24 NAME

25 STREET ADDRESS

26 CITY, ST, ZIP

27 TITLE

28 NAME

29 STREET ADDRESS

30 CITY, ST, ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

35 TITLE

36 NAME

37 STREET ADDRESS

38 CITY, ST, ZIP

*VP - DIRECTOR
Poole, William S.
3164 MEDINAH CIRCLE
LAKE WORTH, FL. 33467*

14. I do hereby certify that the information supplied in this filing is voluntarily furnished and I do not qualify for the exemption stated in Section 199.07(3)(b), Florida Statutes. I further certify that the information is based on the most recent report or supplementary annual report to the annual accounts 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 605, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an affidavit.

SIGNATURE:

William S. Poole VP - Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

3-24-96

407-642-1900

CR2E034 (12/95)