

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S46227** (2)

1. Corporation Name

BAYWAY MANAGEMENT, INC.



Principal Place of Business

Mailing Address

**101 E. KENNEDY BOULEVARD
SUITE 2000
TAMPA FL 33602**

**101 E. KENNEDY BOULEVARD
SUITE 2000
TAMPA FL 33602**

2. Principal Place of Business

2a. Mailing Address

21 3802 S. Westshore Blvd **26 3802 S. Westshore Blvd**

3. Date Incorporated or Qualified

04/16/1991

3a. Date of Last Report

03/02/1995

4. FEI Number

59-3059679

Applied For

Not Applicable

22. City & State

23 TAMPA FL

24. Zip

33611

Country

USA

27. City & State

28 TAMPA FL

29. Zip

33611

Country

USA

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MILLER, MARK E.
101 E. KENNEDY BOULEVARD
SUITE 2000
TAMPA FL 33602**

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 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

Signature of Registered Agent (Required when changing registered agent)

Signature of Registered Agent (Required when changing registered agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	ZARITSKY, STEVEN	
STREET ADDRESS	4924 ANDROS DRIVE	
CITY-ST-ZIP	TAMPA FL	
TITLE	D	☐ DELETE
NAME	MILLER, MARK E.	
STREET ADDRESS	101 E. KENNEDY BLVD.	
CITY-ST-ZIP	TAMPA FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE	☐ Change ☐ Addition
12. NAME	
13. STREET ADDRESS	
14. CITY-ST-ZIP	
21. TITLE	☐ Change ☐ Addition
22. NAME	
23. STREET ADDRESS	
24. CITY-ST-ZIP	
31. TITLE	☐ Change ☐ Addition
32. NAME	
33. STREET ADDRESS	
34. CITY-ST-ZIP	
41. TITLE	☐ Change ☐ Addition
42. NAME	
43. STREET ADDRESS	
44. CITY-ST-ZIP	
51. TITLE	☐ Change ☐ Addition
52. NAME	
53. STREET ADDRESS	
54. CITY-ST-ZIP	
61. TITLE	☐ Change ☐ Addition
62. NAME	
63. STREET ADDRESS	
64. 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)(k), 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:

Mark E. Miller **Mark E. Miller** **4/17/96**

(813) 839-7500

DATE

Signature of Registered Agent

CR2E034 (12/95)