## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# V07054

FILED Jan 28, 2005 Secretary of State

Entity Name: BAY AREA FENCE FACTORY, INC.

Current Principal Place of Business: New Principal Place of Business:

925 HARBOR LAKE CT

SAFETY HARBOR, FL 34695 US

Current Mailing Address: New Mailing Address:

925 HARBORLAKE CTY

SAFETY HARBOR, FL S3469 US

FEI Number: 59-3104466 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HUDSON, MARC AND DIANE HUDSON, DIANE A

925 HARBORLAKE COURT 925 HARBORLAKE COURT

SAFETY HARGOR, FL 34695 US SAFETY HARGOR, FL 34695 US

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.

SIGNATURE: DIANE A. HUDSON 01/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PDS (X) Change ( ) Addition

 Name:
 HUDSON, MARC
 Name:
 HUDSON, DIANE A

 Address:
 735 DELORO DRIVE
 Address:
 1505 CALAMONDIN LANE

 City-St-Zip:
 SAFETY HARBOR, FL 34695
 City-St-Zip:
 CLEARWATER, FL 33759

Title: VSDT ( ) Delete Title: T (X) Change ( ) Addition

Name: HUDSON, DIANE Name: COTE`, JOHN R
Address: 735 DELORO DR. Address: 1505 CALAMONDIN LANE

Address. 755 DELONO DR. Address. 1505 CALAMONDIN LANE
City-St-Zip: SAFETY HARBOR, FL City-St-Zip: CLEARWATER, FL 33759

Title: V () Delete Title: V (X) Change () Addition

 Name:
 ABEL, CRAIG
 Name:
 ABEL, CRAIG L

 Address:
 1066 3RD ST N
 Address:
 1066 3RD ST N

City-St-Zip: SAFETY HARBOR, FL City-St-Zip: SAFETY HARBOR, FL 34695

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANE A. HUDSON PDS 01/28/2005