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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # **J90376 (1)**
1. Corporation Name
BAYSIDE GENERAL CONTRACTING, INC.

Principal Place of Business: **229 DOMINICA CIR. SO. NICEVILLE FL 32578**
Mailing Address: **1016 D JOH SIMS PKWY NICEVILLE FL 32578 US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: **1016 A JOHN SIMS PKW**
2a. Mailing Address: **1016 A JOHN SIMS PKW**
22. Suite, Apt. #, etc.
23. City & State: **NICEVILLE, F**
24. Zip: **32578** 25. Country: **OKLAHOMA**

3. Date Incorporated or Qualified: **09/02/1987** 3a. Date of Last Report: **05/01/1994**
4. FBI Number: **59-2845380**
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 G. 190.002, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**HAZLETT, JOHN A.
1016 A JOHN SIMS PARKWAY
NICEVILLE FL 32570**

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City **FL** B5 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, typed or printed name of registered agent and title) DATE _____ (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAZLETT, JOHN A.	1.2 NAME	
STREET ADDRESS	1016 A JOHN SIMS PARKWAY	1.3 STREET ADDRESS	
CITY - ST - ZIP	NICEVILLE FL	1.4 CITY - ST - ZIP	
TITLE	ST	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAZLETT, BEVERLY A	2.2 NAME	
STREET ADDRESS	1016A JOHN SIMS PKWAY	2.3 STREET ADDRESS	
CITY - ST - ZIP	NICEVILLE FL	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 110.07(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:  **JOHN A. HAZLETT** (Signature, typed or printed name of signing officer or director) DATE: **4/11/95** (Typed Date)