

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2004 08:00 AM
Secretary of State

DOCUMENT # 473521	
1. Entity Name BAILLIE INVESTMENTS, INC.	

Principal Place of Business 101 U S 27 SOUTH SEBRING, FL 33870	Mailing Address 101 U S 27 SOUTH SEBRING, FL 33870
--	--

DO NOT WRITE IN THIS SPACE



03092004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1627118	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

BAILLIE, RAY
101 US 27 SOUTH
SEBRING, FL 33870

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	UN000000000000 A.H. 03/15/04 000000 015 150.00
---	--	---

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST BAILLIE, RAY 101 US 27 SOUTH SEBRING, FL 33870
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BAILLIE, RAY 101 US 27 SOUTH SEBRING, FL 33870
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD BAILLIE, JOHN B. 101 US 27 SOUTH SEBRING, FL 33870
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BAILLIE, KATHRYN C 101 US 27 SOUTH SEBRING, FL 33870
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

UN000000000000
03/25/04-80015-024 150.00

12. I hereby certify that the information supplied with this filing does not qualify 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 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: John Baillie 3/11/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #