

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000026900 1. Entity Name BAUC-WARDS BROKERAGE, INC.	
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Principal Place of Business 1909 MANATEE AVE, EAST BRADENTON, FL 34208 US	Mailing Address 1909 MANATEE AVE, EAST BRADENTON, FL 34208 US
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04262006 No Chg-P CR2E034 (11/05)

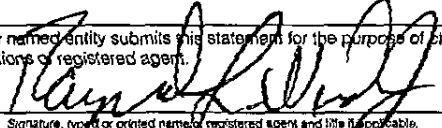
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4. FEI Number 65-0399447	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WARD, RAYMOND L JR. 5542 34TH CT. EAST BRADENTON, FL 34203
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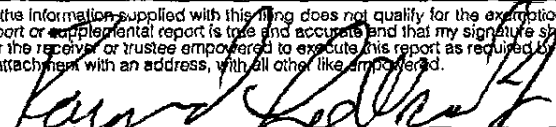
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IN THIS SPACE**

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  RAYMOND L WARD JR 5-1-06 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000000559766 05/18/06-80014-002 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAUCHER, STACY 109 BROWN ST BRADENTON, FL 34208
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARD, RAYMOND L JR. 5542 34TH CT. EAST BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARD, SANDRA I 5542 34TH CT. EAST BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  5-1-06 941-708-3334 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #