

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S94942

**FILED**  
**Jan 07, 2012**  
**Secretary of State**

**Entity Name:** BAILEY'S RETREAT, INCORPORATED

**Current Principal Place of Business:**

22 HAMMOCK TRACE  
CRAWFORDVILLE, FL 32327 US

**New Principal Place of Business:**

**Current Mailing Address:**

22 HAMMOCK TRACE  
CRAWFORDVILLE, FL 32327 US

**New Mailing Address:**

**FEI Number:** 59-3104942

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MILLER, PHILLIP B.  
22 HAMMOCK TRACE  
CRAWFORDVILLE, FL 32327 US

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

MILLER, PHILLIP B TS  
22 HAMMOCK TRACE  
CRAWFORDVILLE, FL 32327 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: PHILLIP B. MILLER

01/07/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: BAILEY, NED  
Address: 735 DELAND LOOP  
City-St-Zip: GREENVILLE, FL 32331

Title: TS  
Name: MILLER, PHILLIP B  
Address: 22 HAMMOCK TRACE  
City-St-Zip: CRAWFORDVILLE, FL 32327

I hereby 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 all other like empowered.

SIGNATURE: PHILLIP B. MILLER

TS

01/07/2012

Electronic Signature of Signing Officer or Director

Date