| ••••••                  |  |                                       |   |        |
|-------------------------|--|---------------------------------------|---|--------|
| 118 GILMORE             | RD   |                                       |   |        |
| SANTA ROSA              | BEACH, FL 32459-5924                                   |                                       |   |        |
|                         |  |                                       |   |        |
| Current Ma              | iling Address:   |                                       |   |        |
| 118 GILMO               | RE RD  |                                       |   |        |
| SANTA RO                | SA BEACH, FL 32459-5924 US                             |                                       |   |        |
|                         |  |                                       |   |        |
| FEI Numbe               | r: 47-4754566  |                                       | Certificate of Status Desir                 | ed: No |
| Name and                | Address of Current Registered Age                      | nt:                                   |   |        |
|                         |  |                                       |   |        |
| CARR, MH<br>74 CHRYSLEF | ? A\/F   |                                       |   |        |
|                         | BEACH, FL 32459 US                                     |                                       |   |        |
|                         |  |                                       |   |        |
| The above name          | d entity submits this statement for the purpose of cha | anging its registered office or regis | tered agent, or both, in the State of Flori | da.    |
| SIGNATUR                | E:   |                                       |   |        |
|                         | Electronic Signature of Registered Agent               |                                       |   | Date   |
| Officer/Dire            | ctor Detail :  |                                       |   |        |
| Title                   | Р  | Title                                 | VP  |        |
| Name                    | BRANDMAN, MARY   | Name                                  | HARP, LINDSEY                               |        |
| Address                 | 38 BLAZING STAR DR                                     | Address                               | 265 GREENBRIAR LN                           |        |
| Citv-State-Zip:         | SANTA ROSA BEACH FL 32459                              | City-State-Zip:                       | SANTA ROSA BEACH FL 32459                   | Э      |
|                         |  | , ,                                   |   |        |
| Title                   | VP   |                                       |   |        |
| Name                    | CARR, MH   |                                       |   |        |
| Address                 | 74 CHRYSLER AVE  |                                       |   |        |
| City-State-7in:         | SANTA ROSA BEACH FL 32459                              |                                       |   |        |
|                         |  |                                       |   |        |

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MH CARR

CO-CHAIRPERSON

03/24/2016

Electronic Signature of Signing Officer/Director Detail

## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000007762

Entity Name: BAY BOOSTERS, INC.

## **Current Principal Place of Business:**

FILED Mar 24, 2016 Secretary of State CC4635612860

Date