

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S94942

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

**Current Principal Place of Business:**

22 HAMMOCK TRACE  
CRAWFORDVILLE, FL 32327

**Current Mailing Address:**

22 HAMMOCK TRACE  
CRAWFORDVILLE, FL 32327 US

**FEI Number:** 59-3104942

**Certificate of Status Desired:** No

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

MILLER, PHILLIP BTS  
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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name BAILEY, NED  
Address 706 SEASHELL LN  
City-State-Zip: NORTH MYRTLE BEACH SC 29582

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

Title DIRECTOR, VP  
Name BAILEY, TED  
Address 735 SW DELAND LOOP  
City-State-Zip: GREENVILLE FL 32331

*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

**TREASURER/SECRETARY** 03/03/2019

Electronic Signature of Signing Officer/Director Detail

Date