


FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 007904

1. Entity Name
The Baggett-Wetherby Co.



FILED
03 MAY -5 AM 11:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
736 S. Beach St.
P.O. Box 2657

3. Mailing Address
P.O. Box 2657

City & State
Daytona Beach, FL

City & State
Daytona Beach, FL

Zip
32114

Country
USA

Zip
32115

Country
USA

DO NOT WRITE IN THIS SPACE

4. FEI Number
59.0152173

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Wilmons B. Baggett

Street Address (P.O. Box Number is Not Acceptable)
736 S. Beach St.

City
Daytona Beach

FL

Zip Code
32114

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 Wilmons B. Baggett DATE 4-23-03

Signature, typed or printed name of registered agent and this if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Lewis, DORA 229 S. Ridgewood Ave. Daytona Beach FL 32114	TITLE NAME STREET ADDRESS CITY-ST-ZIP	700021769917 07/24/03--01084--017 **150.00
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Wilmons B. Baggett DATE 4/23/03 DAYTIME PHONE # 386-2553737

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR