	PROFIT RPORATION UAL REPORT		PARTMENT a B. Morth etary of Sta	am			
	1996	93 (7)	F CORPOF	RATIONS			
Corporatic BAILE	Y & BAILEY INC						
incipal Plac	e of Business	Mailing Address					
33 WEST H	iaiti avenue FL 33440		333 WEST HAITI AVENUE CLEWISTON FL 33440				
					3. Date Incorporated or Qualified 11/23/1965		of Last Report 02/1995
Principa! P	Place of Business	2a. Mailing Address 26			4. FEI Number 59-0578904	- -	Applied For Not Applicable
Suite, Apt.	·	Suite, Apt. #, etc. 27			5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & Stal		City & State			6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	25	2φ 29	30 30	untry		No No	
	9. Name and Address of Cu	nent Registeren Agent			10. Name and Address of New F MARGARET B. BARBER		gent
	HWAY 27				dress (P.O. Box Number is Not Acceptat 142 OAK DRIVE	ole)	
LAKE H	ARBOR FL			83			
				1941 (195)			
. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statu	tes, the ab	84 City	CLEWISTON,	FL pose of chan	85 Zip Code 33440 ging its registered office
	to the provisions of Sections 607.0 red agent, or both, in the State of F ith, and accept the obligations of, S + + + + + + + + + + + + + + + + + +	502 and 607.1508, Florida Statu Forida, Such charge was authori Section 607.0505, Florida Statute		ove-named corporation's bo	oration submits this statement for the pur and of directors. I hereby accept the app	FL pose of chang ointment as re	B5 Zip Code 33440 ging its registered office ogistered agent. I am
Pursuant or registe familiar w GNATURE	Signature fixed or United name of register of a	Pashon	M/	ove-named corporation's bo	oration submits this statement for the purard of directors. I hereby accept the app	12,94	ging its registered office ogistered agent. I am
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