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May 23 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 346038

(3)

1. Corporation Name

BILL BAKER ENTERPRISES INC

Principal Place of Business

1250 DRIFTWOOD DR.  
P.O. BOX 1830  
PENSACOLA FL 32598

Mailing Address

1250 DRIFTWOOD DR.  
P.O. BOX 1830  
PENSACOLA FL 32598-1830

3. Date Incorporated or Qualified

05/12/1969

3a. Date of Last Report

02/14/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BAKER, WILLIAM C  
1250 DRIFTWOOD DR  
GULF COAST PANEL ADS INC  
PENSACOLA FL 32503

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME  
MEADOR, LINDA B.  
STREET ADDRESS  
1690 CONWAY DR  
CITY-ST-ZIP  
PENSACOLA FL

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
BAKER, WILLIAM C.  
STREET ADDRESS  
1250 DRIFTWOOD DR.  
CITY-ST-ZIP  
PENSACOLA FL

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
BAKER, JUNE Q.  
STREET ADDRESS  
1250 DRIFTWOOD DR.  
CITY-ST-ZIP  
PENSACOLA FL

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
BAKER, JAMES Q.  
STREET ADDRESS  
1250 DRIFTWOOD DR.  
CITY-ST-ZIP  
PENSACOLA FL

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: *William C Baker* / WILLIAM C BAKER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/19/97 / 904-438-8425

Date

Daytime Phone

0493186

CR2E034 (9/96)