

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2004 08:00 AM
Secretary of State

DOCUMENT # 439770 1. Entity Name BAKER-COARSEY ENTERPRISES, INC.	
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Principal Place of Business 6703 NO. ARMENIA AVE., TAMPA, FL 33604	Mailing Address 6703 NO. ARMENIA AVE., TAMPA, FL 33604
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04182004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1498035	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GRANT, JOHN A. JR. 1715 N. WESTSHORE BLVD, STE. 700 TAMPA, FL
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

U00000121793
04/21/04-80003-009 150.00

10. OFFICERS AND DIRECTORS

TITLE PD	BAKER, STEPHEN L.
NAME	
STREET ADDRESS 2822 LINTHICUM PL	
CITY- ST- ZIP TAMPA FL.,	
TITLE SD	BAKER, MARY C.
NAME	
STREET ADDRESS 2822 LINTHICUM PL	
CITY- ST- ZIP TAMPA FL.,	
TITLE D	GRANT, JOHN A., JR.
NAME	
STREET ADDRESS 1715 N. WESTSHORE BLVD., #700	
CITY- ST- ZIP TAMPA, FL	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I 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 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 registered agent empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Stephen L. Baker 18 April 2004 933-1709
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #