## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

Corporation Name

Crty & State

ALLEN, JOHN T JR.

**4508 CENTRAL AVENUE** 

T. PETERSBURG FL 33711

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24

Zip

**DOCUMENT #** 

(6)

BAYSIDE DEVELOPMENT COMPANY

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Principal Place of Business	Mailing Address	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
1750 38TH AVE. NO. ST. PETERSBURG FL 33710	7750 38TH AVE. NO. ST. PETERSBURG FL 33710	
		3. Date Incorp 04/09/1
Principal Place of Business	2a. Mailing Address	4. FEI Number 59-15
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5 Cedificate o

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9. Name and Address of Current Registered Agent

City & State

\$8.75 Additional Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199.032, Country Yes No Florida Statutes 10. Name and Address of New Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) 82 83

Date Incorporated or Qualified

04/09/1975

59-1587386

3a. Date of Last Report

06/15/1995

Applied For

Zip Code

85

Not Applicable

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered eigent. I am

Crty

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or registere familiar with	ed agent, or both, in the State of Florida h, and accept the obligations of, Socia	a. Such change was attribrized on 607 1505, Florida i tatutes.	тру (по согрогацог в г	COSID OF CIRCUSCIS. THOROUS BOOSER OF SEA		- 0	
SIGNATURE	Signature, typted or printed number of registered agent a	INOTE IN THE	Registered Agent signature re		DATE		
12. OFFICERS AND DIF CLORS			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE .	PD/	DELETE	1. 1 TITLE	CO-VP	☐ Change	X Addition	
NAME	DALRYMPLE, GERALD F		12 NAME	, -			
STREET ADDRESS	7750-38TH AVE N		1.3 STREET ADDRESS	Cara L. Christy			
CITY-ST-ZIP	ST PETERSBURG FL		1.4 City-ST-ZIP	7750 38th Av. N.			
TITLE	VST	DELETE	2 1 TITLE	St. Petersburg,F1	33716 Crange	Addition	
NAME	DALRYMPLE, NINA M		: 2.2 NAME		<del>-</del>		
STREET ADDRESS	7750-38TH AVE N		2.3 STREET ADDRESS				
•	ST PETERSBURG FL		2.4 CITY - ST-ZIP				
CITY-ST-ZIP TITLE	D	DELETE	3. 1 TITLE		☐ Change	Addition	
NAME	DALRYMPLE, NINA M	<del></del>	3.2 NAME				
STREET ADDRESS	7750-38TH AVE N		3.3. STREET ADDRESS				
	ST PETERSBURG FL		3.4 CITY - \$1 - ZIP				
CITY-ST-ZIP TITLE	OTTERIOR OTTE	TI DELETE	4. 1 TITLE		Change	Addition	
		<u></u>	4.2 NAME				
NAMÉ			4.3 STREET ADDRESS				
STREET ADDRESS							
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP 5. 1 TITLE		[ ] Change	☐ Addition	
TITLE	1	T AFTER				_	
NAME	1		5.2 NAME				
STREET ADDRESS			53 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY - S1 - ZIP		[ ] Change	☐ Addition	
TITLE		DELETE	6 1 TITLE		L'1 Sitange		
NAME			6.2 NAME	1			
STREET ADDRESS			6.3 STREET ADDRESS				
C1TV . ST . 7IP			6.4 CITY - ST- ZIP				

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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.

OR DIRECTOR

CR2E034 (12/95)