Change

☐ Addition

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 473826 1. Corporation Name

BAYSIDE DEVELOPMENT COMPANY

Principal Place of Business 7750 38TH AVE. NO.

TITLE

STREET ADDRESS

Mailing Address

7750 38TH AVE. NO.

Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90041 033 ***150.00



ST. PETERSBURG FL 33710		ST. PETERSBURG FL 33710			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed 04/09/1975	
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For	
21		26				59-1587386 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired See Required	
City & State		City & State				6. Election Campaign Financing S5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Countr	у		8. This corporation owes the current year Intangible	
24	25	29 30	5			Personal Property Tax.	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent	
			81	1	Name		
KAREN E MALLER				82 Street Address (P.O. Box Number is Not Acceptable)			
BARNETT TOWER			02	- Street Address (r o. Box Hamber to Not Mosephanic)			
ONE		83	3				
317	ETE FL 33701		84	4	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		(NOTE: De	aistored Ag	ant e	ianalura ra	required when reinstating) DATE	
42	Signature, typed or printed name of registered agen OFFICERS AN		13.	ent s	ignature re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	PD	DELETE	1.1 TITLE			Change Addition	
NAME	DALRYMPLE, GERALD F		1.2 NAME				
STREET ADDRESS	7750-38TH AVE N		1.3 STREI		DDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		1.4 C/TY+				
TITLE	VST	□ DELETE	2.1 TITLE			Change Addition	
NAME	DALRYMPLE, NINA M		2.2 NAME		1		
STREET ADDRESS	7750-38TH AVE N		2.3 STREE		ndeess		
	A		2. 4 CITY-		- 1		
CITY-ST-ZIP TITLE	D	DELETE	3.1 TITLE			Change Addition	
NAME	DALRYMPLE, NINA M		3.2 NAME				
STREET ADDRESS	7750-38TH AVE N		3.3 STRE		DDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		3.4. CITY-		- 1		
TITLE	CV	☐ DELETE	4.1 TITLE		-	CV + CANA + Change Addition	
NAME	CHRISTY, CARA L.		4. 2 NAM	E	ſ	RIKANSRUD, CARA L 7758 384 AU N.	
STREET ADDRESS	7750 38TH AVENUE NORTH		4.3 STRE	ETA	DORESS	7750 384 AU N.	
CITY-ST-ZIP	ST. PETERSBURG FL		4.4 CITY-		ZIP .	IST Pefersburg, ILL	
TITLE		☐ DELETE	5.1 TITLE		$\neg \neg$	Change Addition	
NAME			5.2 NAME	:		. •	
STREET ADDRESS			5.3 STRE	ET A	DDRESS	· ·	
CITY-ST-ZIP			5.4 CITY-	ST-Z	ZIP	,	

CITY-ST-ZIP 14. 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 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, with all other like empowered.

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

6.4 CITY-ST-ZIP