

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 578183

(6)

1. Corporation Name

BAY-TREE ORGANIZATION, INC.

Principal Place of Business

3933 EDEN ROC CIR EAST  
TAMPA FL 33634

Mailing Address

3933 EDEN ROC CIR EAST  
TAMPA FL 33634



3. Date Incorporated or Qualified

07/10/1978

3a. Date of Last Report

01/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-1839121

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,

Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SHINER, SHIRLEY  
3933 EDEN ROC CIR, E  
TAMPA FL 33634

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 607.1503, 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 NAME STREET ADDRESS CITY-ST-ZIP

P  
SHINER, SHIRLEY  
3933 EDEN ROC CIR E  
TAMPA, FL 00000

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DR  
SHINER, MERVIN  
3933 EDEN ROC CIR E

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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SIGNATURE: Shirley Shiner - SHIRLEY SHINER

Feb 19/96 813-884-7000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone

CR2E034 (12/95)