1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 585364

1. Corporation Name

BAYVIEW CONSTRUCTION CORPORATION

Principal Place of Business
4836 SE RAILWAY AVE. P. O BOX 2583 STUART FL 34997 US

Mailing Address

D O DOV 2502

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90070 003 ***150.00



RSS SE RAILWAT AVE. P. O BOX 2583 STUART FL 34997 US	P. O BOX 2583 STUART FL 34994-2075		DO NOT WRITE IN THI 3. Date Incorporated or Qualifed 09/06/1978	S SPACE
2. Principal Place of Business	2a. Mailing Address 26 48% SE RAI	hom he	4. FEI Number	Applied For Not Applicable
Suite, Apt. #, etc. 2 Cemole Box #	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country		untry USA	This corporation owes the current year to Personal Property Tax.	ntangible Yes Mo
9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered	d Agent
ringe, Kenneth		81 Name	`	
5318 SE SCHOONER OAKS WAY		82 Street Address	ss (P.O. Box Number is Not Acceptable)	٤
STUART FL 34997		83		
		84 City STV	ACT F	L 85 Zip Code
				* 1

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	COUNTY LOCALIDA							
SIGNATURE	Signature, your or printed name of registered agent and title if applicable. (NOTE: Re	gistered Agent signature n						
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	PSTD DELETE	1.1 TITLE	Addition					
NAME	RINGE, KENNETH	1.2 NAME						
STREET ADDRESS	5318 SE SCHOONER OAKS WAY	1.3 STREET ADDRESS	4140 SE. Peterson LAME STUART, FI. 34997					
CITY-ST-ZIP	STUART FL	1.4 CITY-ST-ZIP	STUATT, FI. SYTT					
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition					
NAME		2.2 NAME						
STREET ADDRESS		2.3 STREET ADDRESS						
CITY-ST-ZIP		2. 4 CITY-ST-ZIP						
TITLE	DELETE	3.1 TITLE	Change Addition					
NAME		3.2 NAME						
STREET ADDRESS		3.3 STREET ADDRESS	<u> </u>					
CITY-ST-ZIP		3.4. CITY+ST+ZIP						
TITLE	· DELETE	4.1 TITLE	☐ Change ☐ Addition					
NAME		4.2 NAME						
STREET ADDRESS	1 1	4.3 STREET ADDRESS						
CITY-ST-ZIP		4.4 CITY-ST-ZIP						
TITLE	DELETE	5.1 TITLE	☐ Change ☐ Addition					
NAME		5.2 NAME						
STREET ADDRESS		5.3 STREET ADDRESS						
CITY-ST-ZIP		5.4 CITY+ST+ZIP						
TITLE	DELETE	6.1 TITLE	☐ Change ☐ Addition					
NAME		6.2 NAME						
STREET ADDRESS		6.3 STREET ADDRESS						
CITY-ST-ZIP -	The Art of	6.4 CITY-ST-ZiP	the Pastian 440 07/3VS. Florida Statuton I further cartify that the information					

Interest 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 an attachment with an address, with all other like empowered.

SIGNATURE: