

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # 623697 (0)

1. Corporation Name

BAY STRUCTURES, INC.

Principal Place of Business

497 HAVEN POINT DRIVE
TREASURE ISLAND FL 33706
US

Mailing Address

497 HAVEN POINT DRIVE
TREASURE ISLAND FL 33706
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/04/1979

3a. Date of Last Report

04/25/1994

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1907002

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

22

27

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

City & State

City & State

23

28

7. This corporation has liability for intangible tax under s. 199.13(2),
Florida Statutes ☐ Yes ☐ No

Zip

Country

Zip

Country

24

25

29

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BEETLE, ARTHUR G.
497 HAVEN POINT DRIVE
TREASURE ISLAND FL 33706

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 607.1508, 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

Signature (typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reissuing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

ST

NAME

BEETLE, BONNIE

STREET ADDRESS

497 HAVEN POINT DRIVE
TREASURE ISLAND FL

CITY - ST - ZIP

TITLE

P

NAME

BEETLE, ARTHUR G

STREET ADDRESS

497 HAVEN POINT DRIVE
TREASURE ISLAND FL

CITY - ST - ZIP

TITLE

VP

NAME

KELLEY, GARY

STREET ADDRESS

6447 37TH TERR N
ST PETERSBURG FL

CITY - ST - ZIP

TITLE

VP

NAME

NELSON, JAMES T

STREET ADDRESS

2504 SUNSET WAY
ST PETERSBURG BCH FL

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/19/95 (813) 560-6399