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

**FILED PROFIT** Apr 22 1998 8:00am ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 666679 (6)BAYSHORES REAL ESTATE, INC. Principal Place of Business Mailing Address 3656 61ST WAY 3656 61ST WAY ST PETERSBURG FL 33710 ST PETERSBURG FL 33710 DO NOT WRITE IN THIS SPACE Uŝ 3. Date Incorporated or Qualified 04/14/1980 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-1997721 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6, Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. Yes Yes 29 30 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name LACKEY, KENNETH 3856 61ST WAY 82 Street Address (P.O. Box Number is Not Acceptable) ST PETERSBURG FL 33710 83 84 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 reinstating) OFFICERS AND DIRECTORS 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PDC DELETE TITLE 1.1 TITLE Addition Change LACKEY, KENNETH NAME 1.2 NAME 3656 61ST WAY N STREET ADDRESS 1.3 STREET ADDRESS **ST PETERSBURG FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition 2.1 TITLE Change Lackey, Suzette NAME 2.2 NAME 3656 61ST WAY N STREET ADDRESS 2.3 STREET ADDRESS **\$T PETERSBUG FL** CITY-ST-ZIP 2.4 CHY-ST-ZIP DELETE TITLE 3.1 TITLE Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE TITLE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

14. Thereby 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 orepretion or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address. Konneth Lackon

6.4 CITY-S1-ZIP