

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 690858

1. Entity Name

BAKER AND LINDSEY, INC.

FILED

Feb 27, 2001 8:00 am
Secretary of State

02-27-2001 90339 038 ***158.75

Principal Place of Business

26-B RACETRACK RD NW
STE B
FT WALTON BCH FL 32547
US

Mailing Address

26B RACETRACK RD NW
P. O. BOX 4760
FT. WALTON BEACH FL 32549-4760
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2124279

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WEBSTER, MICHAEL
12 OLD FERRY ROAD
SHALIMAR FL 32579

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE * PD
NAME BAKER, BRADLEY R.
STREET ADDRESS 92 HARRIS RD NE
CITY-ST-ZIP FT WALTON BCH FL ☐ Delete

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE DSV
NAME LINDSEY, HELEN L.
STREET ADDRESS 92 HARRIS RD NE
CITY-ST-ZIP FT. WALTON BEACH FL ☐ Delete

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE LINDSEY, HELEN L.
NAME
STREET ADDRESS 92 HARRIS RD NE
CITY-ST-ZIP FT. WALTON BCH FL ☐ Delete

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
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TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Bradley R. Baker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bradley R. Baker

Date

850-864-1011

Daytime Phone #

CR2E034 (10/00)