2002 UNIFORM BUSINESS REPORT (UBR) FILED Jun 03, 2002 8:00 am Secretary of State **DOCUMENT # 703347** 1. Entity Name **BAY FOUR INC** 06-03-2002 91164 047 ****61.25 Principal Place of Business Mailing Address 8000 EAST DRIVE GATE HOUSE 8000 EAST DRIVE GATE HOUSE NORTH BAY VILLAGE FL 33141 NORTH BAY VILLAGE FL 33141 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2258510 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 🗲 Name Street Address (P.O. Box Number is Not Acceptable) JAFFE, LEAH S 8000 EAST DRIVE #106 N BAY VILLAGE FL 33141 City 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 超激制 经保险管理 民 机动动 ing the Charles to a few and a few SIGNATURE Signature, typed or printed name of registered agent and title if applicable. Signature, typed or printed name of registered agent and title if applicable. DATE 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition PINGITORE, FRANK NAME NAME STREET ADDRESS 8010 E DR #312 STREET ADDRESS CITY-ST-ZIP N. BAY VILLAGE FL 3314 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition GIUDICI. GERRY--NAME STREET ADDRESS 8010 G DR #208 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP N. BAY VILLIAGE FL 33141 TITLE ☐ Delete TITLE NAME GIUDICI, WANDA L NAME STREET ADDRESS 8010 E DR #208 STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP N. BAY VILLAGE FL 33141 ٧D TITLE Delete TITLE Change ☐ Addition AHR, PATRICIA NAME NAME STREET ADDRESS

12. 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 empowers percept execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

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TITLE

NAME

NAME

8020 E DR #317

N. BAY VILLAGE FL 33141

GRINGLER, ELEANORE

N BAY VILLIAGE FL 33141

8010 E DRIVE #308

Delete

☐ Delete

Change

Change

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