2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2004
Secretary of State

DOCUMENT# 703347

Entity Name: BAY FOUR INC

Current Principal Place of Business:

8000 EAST DRIVE GATE HOUSE
106
NORTH BAY VILLAGE, FL 33141 US

New Principal Place of Business:

Current Mailing Address:

8000 EAST DRIVE GATE HOUSE
NORTH BAY VILLAGE, FL 33141

New Mailing Address:

FEI Number: 59-2258510 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANDS, ROBERT
8020 EAST DR #215
N BAY VILLAGE, FL 33141 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete
Name: GIUDICI, GERRY
Address: 8010 G DR #208
City-St-Zip: N. BAY VILLIAGE, FL 33141

Title: SD ( ) Delete
Name: PASQUALE, VERONE
Address: 80000 EAST DR #306
City-St-Zip: N. BAY VILLAGE, FL 33141

Title: PD ( ) Delete
Name: AHR, PAUL R
Address: 8020 E DR #317
City-St-Zip: N. BAY VILLAGE, FL 33141

Title: SD ( ) Delete
Name: HART, JOHN
Address: 8000 EAST DR., #202
City-St-Zip: N BAY VILLAGE, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL R. AHR PD 05/01/2004

Electronic Signature of Signing Officer or Director — Date