


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2007 08:00
Secretary of State


DOCUMENT # 703347
 1. Entity Name
BAY FOUR INC



Principal Place of Business
8000 EAST DRIVE
318
NORTH BAY VILLAGE, FL 33141 US

Mailing Address
8020 E DR
100
NORTH BAY VILLAGE, FL 33141

DO NOT WRITE IN THIS SPACE



01042007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2258510	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GIUDICI, GERRY 8010 G DR #208 N. BAY VILLAGE, FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD AHR, PAUL R 8020 E DR #317 N. BAY VILLAGE, FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HART, JOHN 8000 EAST DR., #202 N BAY VILLAGE, FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD STASHAK, TONY 8010 E DR 207 MIAMI BEACH, FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PINGITORE, FRANK 8010 E DR 312 MIAMI BEACH, FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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00000683520
 04/05/07-80051-010-61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERRY GIUDICI **GERRY GIUDICI** **21/MAR/2007** **305 586 6606**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #