## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## Apr 17, 2003 8:00 am § Secretary of State **DOCUMENT # 723910** 04-17-2003 90649 047 \*\*\*\*61.25 BAY EAST EIGHT, INC. Principal Place of Business Mailing Address 2430 ESTANCIA BLVD. 839 BRANDYWINE DR. LARGO FL 34641-1849 SUITE 114 **CLEARWATER FL 33761** US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. TI CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 59-2292087 Not Applicable Zip Country Zip Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FLORIDA CENTRAL MANAGEMENT, INC. Street Address (P.O. Box Number is Not Acceptable) 2430 ESTANCIA BLVD SUITE 114 **CLEARWATER FL 33761** 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed no e of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE \$ \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PD TITLE ☐ Delete TITLE ☐ Change Addition HOLMES, CHRYSTAL C NAME NAME **822 BRANDYWIND DR** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **LARGO FL 33771** ☐ Delete ☐ Addition □ Change TITLE TITLE DUNCAN, KAREN W NAME NAME STREET ADDRESS **827 BRANDYWIND DR** STREET ADDRESS CITY-ST-ZIP **LARGO FL 33771** CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE GROSSMAN, JUDY NAME NAME STREET ADDRESS **801 BRANDYWINE DR** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **LARGO FL 33771** TITLE ☐ Delete TITLE ☐ Change ☐ Addition WISE, CAROL J NAME NAME STREET ADDRESS **801 BRANDYWINE DR** STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP LARGO FL 33771 ☐ Delete ☐ Change ☐ Addition TITLE TATE, CARL JR NAME NAME **802 BRANDYWINE DR** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LARGO FL 33771 CITY-ST-ZIP TITLE ☐ Delete ☐ Change TIT1 F ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

**FILED** 

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 learning 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. like empowered. CHRYSTAL C - HOLMES SIGNATURE