

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Monahan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 756400 (8)

1. Corporation Name
BAYSHORE OAKS, INC.

Principal Place of Business
% RUC PRITCHETT
6801 BAYSHORE RD / P.O. BOX 2148
FORT MYERS FL 33917

Mailing Address
% RUC PRITCHETT
6801 BAYSHORE RD / P.O. BOX 2148
FORT MYERS FL 33917

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
25 Suite, Apt. #, etc.
26 City & State
27 Zip
28 Country

9. Name and Address of Current Registered Agent
PRITCHETT III, RICHARD H.
6801 BAYSHORE RD
NORTH FT MYERS FL 33917

APPROVED
AND
FILED

95 APR 19 AM 8:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/17/1981

3a. Date of Last Report
06/28/1994

4. FBI Number
59-1570445

Applied For
Not Applicable

5. Certificate of Status Desired
\$8.75 Additional Fee Required

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

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status
\$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes
Yes No

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	1.1 TITLE	
NAME	PRITCHETT III, RICHARD H	1.2 NAME	
STREET ADDRESS	6801 BAYSHORE RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	NO FT MYERS FL	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	
NAME	PETERS, ANNE	2.2 NAME	
STREET ADDRESS	18210 SANDY PINE CIR	2.3 STREET ADDRESS	
CITY-ST-ZIP	NO FT MYERS FL	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	
NAME	NAYLOR, PAMELA	3.2 NAME	
STREET ADDRESS	18200 SANDY PINE CIR	3.3 STREET ADDRESS	
CITY-ST-ZIP	N FT MYERS FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 liquidator empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, even on an attachment with a new name.

SIGNATURE:  4/13/95 8/3 5/3 3434