2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004307

Entity Name: BAYA CORPORATION

FILED Apr 26, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
2045 S TAMIAMI TRAIL	% 437 LAKE OF THE WOODS DRIVE

VENICE, FL 34293 VENICE, FL 34293

Current Mailing Address: New Mailing Address:

PO BOX 1844 VENICE, FL 34284

FEI Number: 16-1622428 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LUCHS, BARRY 437 LAKE OF THE WOODS DRIVE VENICE, FL 34293 US

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition LUCHS, BARRY LUCHS, BARRY

Name: Name: 437 LAKE OF THE WOODS DRIVE 437 LAKE OF THE WOODS DRIVE Address: Address:

City-St-Zip: VENICE, FL 34293 City-St-Zip: VENICE, FL 34293 US

Title: VCVP Title: VCVP () Delete (X) Change () Addition Name: LUCHS, ERIC Name: LUCHS, ERIC

301 N WASHINGTON ST %437 LAKE OF THE WOODS DRIVE Address: Address: VENICE, FL 34293 US City-St-Zip: YPSILANTI, MI 48197 City-St-Zip:

Title: Title: (X) Change () Addition DT () Delete DT LUCHS, SUZANNE LUCHS, SUZANNE Name: Name:

437 LAKE OF THE WOODS DRIVE 437 LAKE OF THE WOODS DRIVE Address: Address:

City-St-Zip: VENICE, FL 34293 City-St-Zip: VENICE, FL 34293 US

Title: DS () Delete Title: DS (X) Change () Addition

HAHN, GARY HAHN, GARY Name: Name:

Address: 709 W. HURON STE. 200 Address: 709 W. HURON STE. 200 City-St-Zip: City-St-Zip: ANN ARBOR, MI 48103 ANN ARBOR, MI 48103 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUZANNE DALE LUCHS DT 04/26/2006