FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2004 8:00 am
Secretary of State
02-19-2004 90020 045 ***150.00

DOCUMENT # F03000003901

1. Entity Name
Bailey Enterprises of Destin

DO NOT WRITE IN THIS SPACE

54008706

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2. Principal Place of Business	3. Mailing Address
Destin Fishing Fleet	1096 Scenic Hwy 98 E
Suite, Apt. #, etc. 210 E Hwy 98 E	Suite, Apt. #, etc. #1402
City & State Destin FL	City & State Destin, FL.
Zip / Country 32541 / Okaloosa	Zip / Country 32550 / Walton

4. FEI Number 63-1035628 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: H. David Bailey
Street Address (P.O. Box Number is Not Acceptable): 1096 Scenic Gulf Drive #1402
City: Destin FL Zip Code: 32550

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: H. David Bailey H. David Bailey 2/15/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Date

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	President
NAME	H David Bailey
STREET ADDRESS	1096 Scenic Gulf Drive #1402
CITY-ST-ZIP	Destin, FL. 32550
TITLE	VP/S
NAME	Melissa S. Bailey
STREET ADDRESS	1304 Logan Lane
CITY-ST-ZIP	Sylacauga, AL. 32150
TITLE	D
NAME	Brian David Bailey
STREET ADDRESS	69 Mountain Springs Dr.
CITY-ST-ZIP	Sylacauga, AL 32150

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CR2E034B (12/02)

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 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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: H. David Bailey 2/15/04 (850) 650-5420
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #