

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16276

FILED  
Jan 09, 2006  
Secretary of State

Entity Name: BAY INSURORS CORPORATION

## Current Principal Place of Business:

26236 WESLEY CHAPEL BLVD  
LUTZ, FL 33559 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 7710  
WESLEY CHAPEL, FL 335447710 US

## New Mailing Address:

FEI Number: 59-2057491

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WREN, ELSIE L.  
26236 WESLEY CHAPEL RD  
LUTZ, FL 33559 US

## Name and Address of New Registered Agent:

WREN, ELSIE L.  
26236 WESLEY CHAPEL BLVD  
LUTZ, FL 33559 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:

01/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DALSON, WILLIAM,  
Address: 35237 JANINE DR  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: V ( ) Delete  
Name: DALSON, EVELYN,  
Address: 35237 JANINE DR  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: ST ( ) Delete  
Name: YOUNG, BRYAN TODD  
Address: 4051 RED FOX CT  
City-St-Zip: ZEPHYRHILLS, FL 33543

Title: P ( ) Delete  
Name: YOUNG, CYNTHIA L,  
Address: 4051 RED FOX CT  
City-St-Zip: ZEPHYRHILLS, FL 33543

Title: D ( ) Delete  
Name: WREN, ELSIE L  
Address: 35237 JANINE DR  
City-St-Zip: ZEPHYRHILLS, FL 33541

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: DALSON, WILLIAM,  
Address: 3717 JENNY LYNNE LANE  
City-St-Zip: FAIRFAX, VA 22030

Title: V (X) Change ( ) Addition  
Name: DALSON, EVELYN,  
Address: 3717 JENNY LYNNE LANE  
City-St-Zip: FAIRFAX, VA 22030

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CYNTHIA L YOUNG

PRES

01/09/2006

Electronic Signature of Signing Officer or Director

Date