2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # F46134

1. Entity Name
NORTH BAY ELECTRONICS, INC.

Principal Place of Business	Mailing Address
3309 FRANKFORD AVE PANAMA CITY, FL 32405	3309 FRANKFORD AVE PANAMA CITY, FL 32405

DO NOT WRITE IN THIS SPACE

01052004   No Chg-P   CR2E034 (10/03)

4. FEI Number 59-2128171	Applied For
	Not Applicable

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

6. Name and Address of Current Registered Agent

BENNETT, JULIAN
3309 FRANKFORD AVENUE
PANAMA CITY, FL 32405

DO NOT WRITE
IN THIS SPACE

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 name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2004 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10.	OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCE KENNEDY, MICHAEL 3309 FRANKFORD AVENUE PANAMA CITY, FL	U00000049010 02/13/04-80006-013 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		**DO NOT WRITE** **IN THIS SPACE**
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

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 Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: _____ MICHAEL S. KENNEDY 2/11/14 (850) 785-9531

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #