

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 19, 2007 08:00 AM
Secretary of State**

DOCUMENT # F93481

1. Entity Name
BAUMANN PROPERTY MANAGEMENT, INC.



Principal Place of Business
**2543 CONSTITUTION BLVD.
SARASOTA, FL 34231**

Mailing Address
**2543 CONSTITUTION BLVD.
SARASOTA, FL 34231**

DO NOT WRITE IN THIS SPACE



02142007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2213322

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SCOVILL, HAROLD W.
1605 MAIN STREET #912
SARASOTA, FL 33577**

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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 reappointing)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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
**STDP
BAUMANN, DOLORES A.
2543 CONSTITUTION BLVD.
SARASOTA, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**AS
BEDDOW, JULIE B
514 CHEVY CHASE RD
SARASOTA, FL 34243**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000641586
03/01/07-80005-010 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Dolores A. Baumann, Dolores A. BAUMANN, PRES. Feb 14 2007 941-921-6800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #