FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

7	9	9	6	

DOCUMENT #

F95000005449 (2)

BAYSIDE INVESTMENT CO. OF MARYLAND, INC.								
Principal Place of Business	Mailing Address							
8737 COLESVILLE ROAD. STE 800 SILBER SPRINGS MD 20910	8737 COLESVILLE ROAD. STE 800							



8737 COLESVILLE ROAD. STE 800 SILBER SPRINGS MD 20910		8737 COLESVILLE ROA SILBER SPRINGS MD 2	.D. STE 800 20910					
2 Principal D					3. Date Incorporated or Qualified 11/07/1995	3a. Date	of Las	at Report
21 Principal P	lace of Business	2a. Mailing Address			4. FEI Number			Applied For
Suite, Apt.	#, elc.				52-1946810			Not Applicable
22	,	27			5. Certificate of Status Desired	П		75 Additional
City & State		City & State			& Floring Coursely Fig.			ee Required
	R SPRING, MD.	28 SILVER SPR	ING .	MD.	Election Campaign Financing Trust Fund Contribution			.00 May Be
Zip 24	Country	Zip	Countr		8. This corporation has liability for	ntanoible ta		
24]	25 9. Name and Address of Curre	29	30		Florida Statutes Yes	□ No		. 0 100.002.,
	J. Hame and Address of Curre	ant Hegistereo Agent	81	T No.	10. Name and Address of New R	egistered A	igent	
REALTY	Y INVESTMENT COMPANY		81	Name				
	ATT LUNDSTROM		82	Street	Address (P.O. Box Number is Not Acceptab	e)		
	ORTH WICKHAM ROAD, STE 1	18	83	 				
	URNE FL 32935		L	L				
			84	4.49		!		Zip Code
11. Pursuant t	to the provisions of Sections 607.050	2 and 507.1508, Florida Statutes	the above	l named co	orporation submits this statement for the purple board of directors. I horeby accept the apport	PL Yana af aba	11	
familiar wit	ed agent, or both, in the State of Floi th, and accept the obligations of, Sec	rida. Such change was authorized ction 607.0505, Florida Statutes.	by the com	oration's	board of directors. I hereby accept the appoint	intment as i	egister	ed agent. I am
I SIGNATURE								ĺ
12.	Signature, typed or printed name of registered age:			it signature r	eou red when reinstating)	DATE		
TITLE	PD OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	ERS AND	DIRECT	TORS IN 12
NAME	BAINUM, STEWART	[] becele	1 3 TITLE	1	D Control D] Change	e 🗶 Addition
STREET ADDRESS	8737 COLESVILLE ROAD, S	STE 800	1.2 NAME		FROOM , ROBERTA D.	~ 0m		
CITY-ST-ZIP	SILVER SPRING MD		1.3 STREE1 1.4 CITY - S		8737 COLESVILLE ROAD, SUIT SILVER SPRING, MD. 20910	5 640		
TITLE	Vī	DELETE	2 1 TITLE	1-214	D DIEVER STRING, MD. 20110		Chana	
NAME	BOWDITCH, PATRICIA		2.2 NAME		BAINUM, STEWART W. Jr.	L	Change	e 📉 Addition
STREET ADDRESS	8737 COLESVILLE ROAD, S	TE 800	2.3 STREET	ADDRESS	\$737 COLBSVILLE ROAD SUIT	E 800		
CITY-ST-ZIP	SILVER SPRING MD		24 CITY-S	f-ZIP	SILVER SPRING, MD 20910			1
TITLE	EVERNOARA MULATA	DELETE	3 1 TITLE			Г	Change	Addition
NAME OTOSET LDOGGOO	EVERNGAM, WILLIAM 8737 COLESVILLE ROAD, S	TC 000	3.2 NAME				·	
STREET ADDRESS CITY-ST-2IF	SILVER SPRING MD	1E 800	3.3 STREET	ADDRESS				ľ
TITLE	S		3.4 CITY - S	r-ZIP				
NAME	DONNELLY, RUTH	[] DELETE	4. 1 TITLE				Change	Addition
STREET ADDRESS	8737 COLESVILLE ROAD, S	TE 800	4 2 NAME					
CITY-ST-ZIP	SILVER SPRING MD	- 	4.3 STREET	- 1				ĺ
TOLE	D	☐ DELETE	4.4 CITY - S1 5. 1 TITLE	- 202			Chara	
NAME	BAINUM, BARBARA	<u></u>	5.2 NAME			LJ	Change	Addition
STREET ADDRESS	8737 COLESVILLE ROAD, S'	TE 800	53 STREET	ADDRESS				
CITY-ST-ZIP	SILVER SPRING MD		5.4 CITY-ST					1
TITLE	D DAMEN PRIOR	☐ DELETE	6. 1 TITLE				Change	Addition
NAME	BAINUM, BRUCE	TP 444	6.2 NAME			ب	- mingo	
STREET ADDRESS	8737 COLESVILLE ROAD, ST	IE 800	63 STREET A	ODRESS				
CITY-ST-ZIP	SILVER SPRING MD	71/	6.4 C/TY-ST	- 7IP				

-ST-2P | 64.01Y-SI-2IP |

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed, or on an attachment with an address.

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Duly

Dul

SIGNATURE: