

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2000 8:00 am
Secretary of State

01-21-2000 90063 025 ***150.00

DOCUMENT # F97000001883

1. Entity Name

BAY AREA PIGGYBACK, INC.

Principal Place of Business

560 LENNON LN
 WALNUT CREEK CA 94598

Mailing Address

560 LENNON LN
 WALNUT CREEK CA 94598-2415

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

94-2286648

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

804026



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LOTERO, RUSHTON G
6885 NW 25TH ST BAY #5
MIAMI FL 33122

Name

Lotero-Rushton, Gloria

Street Address (P.O. Box Number is Not Acceptable)

8125 NW 53rd St #118

City

Miami

FL

Zip Code
33166

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VP	<input type="checkbox"/> Delete
NAME	FRANCIS, GERALD A	
STREET ADDRESS	1690 SARGENT RD	
CITY-ST-ZIP	CONCORD CA 94518	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MERRITT, ELEANOR	
STREET ADDRESS	23585 W 207TH ST	
CITY-ST-ZIP	SPRING HILL KS 66083	
TITLE	DST	<input type="checkbox"/> Delete
NAME	FRANCIS, MYRNA J	
STREET ADDRESS	1670 SARGENT RD	
CITY-ST-ZIP	CONCORD CA 94518	
TITLE	P	<input type="checkbox"/> Delete
NAME	FRANCIS, GEORGE W	
STREET ADDRESS	1261 BERMUDA CT	
CITY-ST-ZIP	CONCORD CA 94518	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Francis W. Francis
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/05/00

925-932-1313

Date

Daytime Phone #

CR2E034 (9/99)