

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 27, 2005 08:00 AM
Secretary of State**

DOCUMENT # F99000003076

1. Entity Name
BAY AREA PROPERTIES GROUP, INC.



Principal Place of Business

**1513 W BUSH BLVD
TAMPA, FL 33612**

Mailing Address

**1513 W BUSH BLVD
TAMPA, FL 33612**



01242005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
48-1213732

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**MIZE, ROBERT
1515 WEST BUSCH BLVD
TAMPA, FL 33612**

**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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**U000000337551
04/27/05-80172-011 158.75**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PC
MIZE, ROBERT
1513 WEST BUSCH BLVD.
TAMPA, FL 33612**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VVC
MIZE, BRYAN
1513 WEST BUSCH BLVD.
TAMPA, FL 33612**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
MIZE, LORI
1513 BUSH BLVD.
TAMPA, FL 33612**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
MIZE, KAREN
1513 WEST BUSCH BLVD.
TAMPA, FL 33612**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MIZE, KEVIN
1513 W. BUSCH BLVD
TAMPA, FL 33612**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

Lori Mize **LORI MIZE**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/05 813-9834393

Date

Daytime Phone #