**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # G52363**

BAYBRIDGE HAIR DESIGNS,	INC.	
Principal Place of Business	Mailing Address	•
316 GULF BREEZE PKWY GULF BREEZE FL 32561	316 GULF BREEZE PKWY GULF BREEZE FL 32561	
2. Principal Place of Business	2a. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90099 034 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualifed

08/02/1983

4. FEI Number

Suite, Apt. #, etc.    Suite, Apt. #, etc.   27	21		26				59-2320216	No	ot Applicable	
City & State   20		#, etc.	Suite, Apt. #, etc.	****	·					
Zip Country Zip Country 8. Trust Fund Contribution Added to Fees   Zip Country Zip Country 8. Trust Fund Contribution Added to Fees   Zip Country Zip Country 8. This corporation owes the current year Intangable Personal Property Tax.   Yes   No   Recommendation of the Previous Property Tax   Yes   No   Recommendation of the Previous Property Tax   Yes   No   Recommendation of the Provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or registered agent, or the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or registered agent, o	22									
Zip Country Zip Country Zip Country 8. This corporation owes the current year Intangible Personal Property Tax.   \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			<del></del>				· -			
28 30 Personal Property Tax.	23		<del></del>	Cour	ntn.				to rees	
S. Name and Address of Current Registered Agent  BURCH-GODWIN, BELINDA, GAY 5717 BONANZA DR GULF BREEZE FL 32561  13. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and an intermit with, and accept the obligations of, Section 87 0505, Ferioda Statutes.  SIGNATURE Signature, typed or publicit name of registered agent and this if applicable.  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTERETACORESS  STITE BONANZA DR  12. TITLE  DELETE  11. TITLE  DELETE  11. TITLE  DELETE  12. TITLE  DELETE  13. TITLE  Change  Addition  TREE HOORSS  TITLE  DELETE  13. TITLE  Change  Addition  Change  Change  Addition  Change  Change  Change			— `							
BURCH-GODWIN, BELINDA, GAY 5717 BONANZA DR GULF BREEZE FL 32561    13	24	.1771		[30]						
STAT BONANZA OR GULF BREEZE FL 32561  81  82  Street Address (P.O. Box Number is Not Acceptable)  84  City FL  85  City FL  85  City FL  85  City FL  86  City FL  87  Service Address (P.O. Box Number is Not Acceptable)  86  For Portion Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and for inspire agent are the finglesian.  80  SIGNATURE  SI		J. Hame and Address of Curren	it Kegistered Agent		81 Na	me		<u></u>		
STAT BONANZA OR GULF BREEZE FL 32561  81  82  Street Address (P.O. Box Number is Not Acceptable)  84  City FL  85  City FL  85  City FL  85  City FL  86  City FL  87  Service Address (P.O. Box Number is Not Acceptable)  86  For Portion Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and for inspire agent are the finglesian.  80  SIGNATURE  SI	BURG	CH-GODWIN, BELINDA, GAY								
GULF BREEZE FL 32561  84 City FL 85 Zip Code  17. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or hoth, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or hoth, in the State of Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14.1 ITITE  12. OFFICERS AND DIRECTORS 15.1 ITITE  12. OFFICERS AND DIRECTORS 15.2 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.2 WAVE  13. STREETADORSS 5777 BONANZA DR 13.5 ITITE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.2 WAVE  14. OTTY-ST-2P  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.2 WAVE  15. STREETADORSS 5777 BONANZA DR 13.5 ITITE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.2 WAVE  16. ODWIN, ROY STANLEY 22.2 WAVE  17. ST.2P  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.2 WAVE  18. STREETADORSS 5777 BONANZA DR 25.5 ITITE					82 Str	eet Addre	ss (P.O. Box Number is Not Acceptable	)		
State   Part					83					
Figure   F										
office or registered agent, or both, in the State of Florida. Such change was automated by the corporation's Doard of directors. Interestly succept the appointment as registered agent and sear if applicable.    Signature					84 Cit	у		FL 85 Zip	Code	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nerely stocept the appointment as registered agent and accept the obligations of, Section 607/9059, Florida Statutos.  Signature. Speakure. Spea	11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	tes, the at	oove-nar	ned corpo	ration submits this statement for the pur	pose of changing its	registered	
SIGNATURE Signature, Npoed or printed name of registered agent and tifin if applicable.  IZ. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE BURCH-GODWIN, BELINDA 12 NAME STIT BONANZA DR 15 STREET ADDRESS STIT ST.2P 15 ST.2P 15 STREET ADDRESS STIT ST.2P 1	office or re	egistered agent, or both, in the State	of Florida. Such change was a	authorized	by the o	corporation	n's board of directors. I hereby accept the	e appointment as re	egistered	
Signature, lyosed or printed name of registered appert and title if applicable.  (NOTIE Registered Appert signature required when reinstating)  DATE  OFFICERS AND DIRECTORS IN 12  TITLE  PD  OBLETE  1.1 TITLE  OCHange   Addition  Addition  Addition  Addition  Addition  Addition  Addition  BURCH-GODWIN, BELINDA  1.3 STREET ADDRESS  TOT17 BONANZA DR  1.3 STREET ADDRESS  GULF BREEZE FL  1.4 CITY-ST-ZIP  GODWIN, ROY STANLEY  2.2 WMAE  2.3 STREET ADDRESS  STATEST AD		m tamiliar with, and accept the boliga	ations of, Section 607.0505, Fit	JIIOA SIAIL	105.					
THE PO DELETE 11 TITLE CHANGE TO OFFICERS AND DIRECTORS IN 12  THE PO DELETE 11 TITLE CHANGE TO OFFICERS AND DIRECTORS IN 12  THE BURCH-GODWIN, BELINDA 1.2 MARE  STORMAN TREET ADDRESS 5717 BONANZA DR 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP CHANGE TO OFFICERS AND DIRECTORS IN 12  THE DO DELETE 2.1 TITLE CHANGE CHAN	SIGNATURE	Signature, typed or printed name of registered age	ant and title if applicable. (NOT	E: Registered	Agent signs	ature required	when reinstating)	DATE		
BURCH-GODWIN, BELINDA 5717 BONANZA DR GULF BREEZE FL  D   DELETE   1.4 CITY-ST-ZP  GODWIN, ROY STANLEY 5117 BONANZA DR. GULF BREEZE FL  2.2 STREET ADDRESS GULF BREEZE FL  1.4 CITY-ST-ZP  GODWIN, ROY STANLEY 5117 BONANZA DR. GULF BREEZE FL  1.4 CITY-ST-ZP  GODWIN, ROY STANLEY 5117 BONANZA DR. GULF BREEZE FL  1.5 LA CITY-ST-ZP  GOLF BREEZE FL  1.6 LA CITY-ST-ZP  GOLF BREEZE FL  1.7 LA CITY-ST-ZP  GOLF BREEZE FL  1.8 LA CITY-ST-ZP  GOL	12.			13.	<u> </u>		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	ORS IN 12	
TREET ADDRESS GULF BREEZE FL  1.3 STREET ADDRESS GULF BREEZE FL  1.4 CITY- \$1-ZP  THE  CODWIN, ROY STANLEY  22 NAME 23 STREET ADDRESS STREET	TITLE	PD	☐ DELETE	1.1 TI	lE.			☐ Change	☐ Addition	
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GULF BREEZE FL  14 CITY-ST-ZP  ITILE  D  GODWIN, ROY STANLEY  5117 BONANZA DR.  GULF BREEZE FL  22 NAME  23 STREET ADDRESS  STRY-ST-ZIP  TILE  AME  31 STREET ADDRESS  TITTLE  AME  41 TITLE  AME  42 NAME  43 STREET ADDRESS  TITTLE  AME  43 STREET ADDRESS  TITTLE  AME  AME  AME  AME  AME  AME  AME  A	STREET ADDRESS			1.3 ST	REET ADD	RESS				
TITLE D Change Addition  AMME GODWIN, ROY STANLEY  5117 BONANZA DR.  GULF BREEZE FL  DELETE  1 TITLE  1 Change Addition  AMME  1 STREET ADDRESS  2.4 CITY-5T-ZIP  TITLE  1 TITLE  1 Addition  AMME  1 STREET ADDRESS  2.4 CITY-ST-ZIP  TITLE  1 TITLE  1 STREET ADDRESS  3.4 CITY-ST-ZIP  TITLE  4.1 TITLE  4.2 NAME  4.2 NAME  4.2 NAME  4.3 STREET ADDRESS  TITY-ST-ZIP  TITLE  AMME  4.2 NAME  4.3 STREET ADDRESS  TITY-ST-ZIP  TITLE  AMME  5.3 STREET ADDRESS  TITY-ST-ZIP  TITLE  AMME  5.4 CITY-ST-ZIP  TITLE  AMME  5.5 STREET ADDRESS  TITY-ST-ZIP  TITLE  Change Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  AMME  5.5 STREET ADDRESS  TITY-ST-ZIP  TITLE  Change Addition  Addition  Addition  AMME  5.5 STREET ADDRESS  TITY-ST-ZIP  TITLE  CHANGE  Addition  Addition  Addition  AMME  5.5 STREET ADDRESS  TITY-ST-ZIP  TITY-ST-ZIP  TITY-ST-ZIP  TITY-ST-ZIP  TITY-ST-ZIP  TITY-ST-ZIP  TITY-ST-ZIP  TITY-ST-ZIP  TITY-ST-ZIP	· · · ·	GULF BREEZE FL		1.4 CI	ry-st-zip				}	
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### STYLE	NAME	GODWIN, ROY STANLEY		2.2 NA	ME				,	
### STYLE   GULF BREEZE FL   2.4 CITY-ST-ZIP   ####################################	STREET ADDRESS	5117 BONANZA DR.		2.3 ST	REET ADD	RESS			- 1	
TILE	CITY-ST-ZIP	GULF BREEZE FL		2.4 CI	TY-\$T-ZIP					
33 STREET ADDRESS   34. CITY-ST-ZIP	TILE .	-	DELETE	3.1 111	LE .			Change	☐ Addition	
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SAME	CITY-ST-ZIP			4.4 CF	ry-st-zip					
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CITY-ST-ZIP 64 CITY-ST-ZIP	NAME								ł	
	STREET ADDRESS			6.3 ST	REET ADD	RESS			ļ	
	CITY-ST-ZIP									
14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an	14. I hereby o	certify that the information supplied w	rith this filing does not qualify for	or the executate	mption s	tated in Se	ection 119.07(3)(i), Florida Statutes. I full shall have the same legal effect as if ma	ther certify that the	information I am an	