FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 05, 2002 8:00 am Secretary of State DOCUMENT# G70978 1. Entity Names 02-05-2002 90021 027 ***150.00 BAYFRONT INN, INC. Principal Place of Business Mailing Address 138 AVENIDA MENENDEZ 138 AVENIDA MENENDEZ ST. AUGUSTINE FL 32084 ST. AUGUSTINE FL 32084 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2366790 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WHETSTONE, ESTHER S. Street Address (P.O. Box Number is Not Acceptable) 282 ST GEORGE ST ST. AUGUSTINE FL 32084 City Zip Code FL 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/4-13-03-03 : 分析: (NOTE: Registered Agent signature typed or printed name of registered agent and title if applicable () () (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State WARRISCH FRE DEC OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ☐ Change ☐ Addition WHETSTONE, ESTHER: S NAME NAME 282 ST GEORGE STREET STREET ADDRESS STREET ADDRESS ST AUGUSTINE, FL 00000 32084 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE WHETSTONE, HENRY M. JR. NAME NAME STREET ADDRESS 400 OLD QUARRY RD STREET ADDRESS ST. AUGUSTINE FL 32084 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DVP TITLE ☐ Delete TITLE Change NAME whetstone, Henry M. Sr. NAME 282 ST. GEORGE STREET STREET ADDRESS STREET ADDRESS ST. AUGUSTINE FL 32084 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE whetstone, virginia ann NAME NAME STREET ADDRESS 297 ST GEORGE ST STREET ADDRESS ST. AUGUSTINE FL 32084 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR