

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**

**Apr 09, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # G70978**

1. Entity Name

BAYFRONT INN, INC.



Principal Place of Business

138 AVENIDA MENENDEZ  
ST. AUGUSTINE FL 32084  
US

Mailing Address

138 AVENIDA MENENDEZ  
ST. AUGUSTINE FL 32084  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



1st MOORE

CR2E034 (10/04)

4. FEI Number

59-2366790

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WHETSTONE, ESTHER S.  
282 ST GEORGE ST  
ST. AUGUSTINE FL 32084

Name

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

City

**FL**

Zip Code

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**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☐ Delete  
NAME WHETSTONE, ESTHER S  
STREET ADDRESS 282 ST GEORGE STREET  
CITY - ST - ZIP ST AUGUSTINE, FL 00000 32084

TITLE D ☐ Delete  
NAME WHETSTONE, HENRY M. JR.  
STREET ADDRESS 400 OLD QUARRY RD  
CITY - ST - ZIP ST. AUGUSTINE FL 32084

TITLE DVP ☐ Delete  
NAME WHETSTONE, HENRY M. SR.  
STREET ADDRESS 282 ST. GEORGE STREET  
CITY - ST - ZIP ST. AUGUSTINE FL 32084

TITLE D ☐ Delete  
NAME WHETSTONE, VIRGINIA ANN  
STREET ADDRESS 297 ST GEORGE ST  
CITY - ST - ZIP ST. AUGUSTINE FL 32084

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
000000236619  
04/09/05-80074-025 150.00

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/05

Daytime Phone #