

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2006 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 (10/05)

4. FEI Number 59-2366790	Applied For Not Applied
------------------------------------	----------------------------

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent WHETSTONE, ESTHER S. 282 ST GEORGE ST ST. AUGUSTINE FL 32084
--

7. Name and Address of New Registered Agent
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 _____ (NOTE: Registered Agent signature required when resigning) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00** May 2
Trust Fund Contribution. ☐ Added to Fees

10. OFFICERS AND DIRECTORS	
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	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	☐ Change ☐ Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: _____

11/31/06