

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90086 028 ***150.00

DOCUMENT # H98900

1. Corporation Name

BAIE'S PRINTING, INC.



Principal Place of Business

174A SEMORAN COMMERCE PL., #113
APOPKA FL 32703

Mailing Address

174A SEMORAN COMMERCE PL., #113
APOPKA FL 32703

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/01/1986

4. FEI Number

59-2664243

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐ ..

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 174B SEMORAN COMMERCE PL.

Suite, Apt. #, etc.

22 #116

23 City & State

23 APOPKA FL

24 Zip

24 32703

Country

25 USA

2a. Mailing Address

26 174B SEMORAN COMMERCE PL.

Suite, Apt. #, etc.

27 #116

28 City & State

28 APOPKA FL

29 Zip

29 32703

Country

30 USA

9. Name and Address of Current Registered Agent

BAIE, TERRY B.

1144 N OLD MILL DRIVE

DELTONA FL 32725

10. Name and Address of New Registered Agent

81 Name
BAIE, TERRY B.

82 Street Address (P.O. Box Number is Not Acceptable)
174B SEMORAN COMMERCE PL.

83 Suite, Apt. #, etc.

84 #116

84 City
APOPKA

85 State
FL

85 Zip Code
32703

11. 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 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE TERRY B. BAIE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-1-99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
BAIE, SUSAN A.
STREET ADDRESS 1144 N OLD MILL DR.
CITY-ST-ZIP DELTONA-FL

TITLE ☐ DELETE

NAME VD
BAIE, TERRY B.
STREET ADDRESS 1144 N OLD MILL DR.
CITY-ST-ZIP DELTONA-FL

TITLE ☐ DELETE

NAME T
BAIE, SUSAN A.
STREET ADDRESS 1144 N OLD MILL DR.
CITY-ST-ZIP DELTONA-FL

TITLE ☐ DELETE

NAME V
BAIE, LISA M.
STREET ADDRESS 1144 N OLD MILL DR.
CITY-ST-ZIP DELTONA-FL

TITLE ☒ DELETE

NAME V
BAIE, STEVEN B.
STREET ADDRESS 1521 KENYLN DR
CITY-ST-ZIP LONGWOOD FL 32779

TITLE ☒ DELETE

NAME S
BETH ANE BATE
STREET ADDRESS 1521 KENYLN DR
CITY-ST-ZIP LONGWOOD FL 32779

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 174B SEMORAN COMMERCE PL #116
1.4 CITY-ST-ZIP APOPKA FL 32703

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS SAME AS ABOVE
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS SAME AS ABOVE
3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS D MAIER, LISA M.
4.4 CITY-ST-ZIP 6158 LINNEAL BEACH
APOPKA FL 32703

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Susan A. Baie

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-1-99 407-884-6995

CR2E034 (11/98)

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