

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90015 021 ***150.00

DOCUMENT # J28915

1. Entity Name
NORTH BAY RENTALS, INC.

Principal Place of Business

% LOUISA TAYLOR
 212 VIRGINIA AVE.
 LYNN HAVEN FL 32444

Mailing Address

% LOUISA TAYLOR
 212 VIRGINIA AVE.
 LYNN HAVEN FL 32444

840000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3416 Hwy 390

Suite, Apt. #, etc.
PANAMA CITY

City & State
FLA

Zip
32405

Country
USA

3. Mailing Address

3416 Hwy 390

Suite, Apt. #, etc.
PANAMA CITY

City & State
FLA

Zip
32405

Country
USA

4. FEI Number

59-2708867

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TAYLOR, LOUISA
212 VIRGINIA AVE.
LYNN HAVEN FL 32444

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
DP	TAYLOR, LOUISA	212 VIRGINIA AVE.	LYNN HAVEN FL	<input type="checkbox"/>
D	TAYLOR, DON	212 VIRGINIA AVE.	LYNN HAVEN FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		3416 Hwy 390	PANAMA CITY, FL 32405	<input type="checkbox"/>	<input type="checkbox"/>
		3416 Hwy 390	PANAMA CITY, FL 32405	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: Don Taylor **DON TAYLOR** 4/16/02 (850) 265-9424

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)