

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J35555

1. Entity Name

BAYBROOK PROPERTIES, INC.

FILED

May 03, 2001 8:00 am
Secretary of State

05-03-2001 90998 024 ***158.75

Principal Place of Business

% JACK H. BRAY
4830 W. KENNEDY BLVD., SUITE 740
TAMPA FL 33609-2552

Mailing Address

% JACK H. BRAY
4830 W. KENNEDY BLVD., SUITE 740
TAMPA FL 33609-2552

C0059464



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4890 W. Kennedy Blvd.

Suite, Apt. #, etc.

Suite 850

City & State

Tampa, FL

Zip

33609-1863

Country

USA

3. Mailing Address

4890 W. Kennedy Blvd.

Suite, Apt. #, etc.

Suite 850

City & State

Tampa, FL

Zip

33609-1863

Country

USA

4. FEI Number

59-2733867

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRAY, JACK
4830 W KENNEDY BLVD
SUITE 740
TAMPA FL 33609

7. Name and Address of New Registered Agent

Name

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

4890 W. Kennedy Blvd.

Suite 850

City

Tampa,

FL

Zip Code

33609-1863

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, 2001 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 PD ☐ Delete
NAME BRAY, JACK H
STREET ADDRESS 4830 W KENNEDY BLVD., SUITE 740
CITY-ST-ZIP TAMPA FL

TITLE VPS ☐ Delete
NAME ROSS, SAMUEL K.
STREET ADDRESS 4830 W. KENNEDY BLVD.
CITY-ST-ZIP TAMPA FL

TITLE VD ☐ Delete
NAME GREEN, DANIEL B.
STREET ADDRESS 4830 W. KENNEDY BLVD.
CITY-ST-ZIP TAMPA FL

TITLE T ☐ Delete
NAME WEST, DALE A
STREET ADDRESS 4830 W. KENNEDY BLVD., SUITE 740
CITY-ST-ZIP TAMPA FL

TITLE VP ☐ Delete
NAME WILKINSON, J C
STREET ADDRESS 4830 W KENNEDY BLVD SUITE 740
CITY-ST-ZIP TAMPA FL 33609

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/D ☒ Change ☐ Addition
NAME
STREET ADDRESS 4890 W. Kennedy Blvd., #850
CITY-ST-ZIP Tampa, Florida 33609-1863

TITLE V/S ☒ Change ☐ Addition
NAME
STREET ADDRESS 4890 W. Kennedy Blvd., #850
CITY-ST-ZIP Tampa, Florida 33609-1863

TITLE V ☒ Change ☐ Addition
NAME
STREET ADDRESS 4890 W. Kennedy Blvd., #850
CITY-ST-ZIP Tampa, Florida 33609-1863

TITLE V/T ☒ Change ☐ Addition
NAME
STREET ADDRESS 4890 W. Kennedy Blvd., #850
CITY-ST-ZIP Tampa, Florida 33609-1863

TITLE V ☒ Change ☐ Addition
NAME WILKINSON, J. CURT
STREET ADDRESS 4890 W. Kennedy Blvd., #850
CITY-ST-ZIP Tampa, Florida 33609-1863

TITLE ☐ Change ☐ Addition
NAME
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

Samuel K. Ross

4.25.2001

Date

813.286.4140

Daytime Phone #

CR2E034 (10/00)