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**

DOCUMENT #

BAYSIDE UTILITIES, INC.

FILED Jan 27, 1999 8:00am **Secretary of State**

01-27-1999 90037 027 ***150.00



Principal Place	of Business	Mailing Address			T (Eliti dian alan alan alan alan
% DOROTHY J. BURTON 6325 BIG DADDY DRIVE PANAMA CITY BEACH FL 32407 S DOROTHY J. BURTON 6325 BIG DADDY DRIVE PANAMA CITY BEACH FL 32407					DO NOT WRITE IN THIS	S SPACE
					3. Date Incorporated or Qualifed 07/10/1987	
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21	26				59-2842828	Not Applicable
Suite, Apt. 7	ŧ, etc.	Suite, Apt. #, etc.		•	5. Certifcate of Status Desired	\$8.75 Additional Fee Required
	City & State City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	7: 00		Country			
24	25 29 30			Personal Property Tax. Yes No		
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent
			81	81 Name		
BURTON, DOROTHY J. 6325 BIG DADDY DRIVE			82	Street Addr	ess (P.O. Box Number is Not Acceptable)	
	AMA CITY BEACH FL 32407		83		3	
		,	84	City	F	85 Zip Code
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.						
CICNIATURE				_		<u> </u>
SIGNATURE	Signature, typed or printed name of registered agent			nt signature require	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIDECTORS IN 12
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	☐ Change ☐ Addition
TITLE	DP	_	1.1 TITLE		•	
NAME	BURTON, DOROTHY J.		1.2 NAME	İ		
STREET ADDRESS	6325 BIG DADDY DRIVE			TADDRESS		
CITY-ST-ZIP	PANAMA CITY BEACH FL		1.4 CITY-S	T-ZIP		☐ Change ☐ Addition
TITLE		_	2.1 TITLE			
NAME			2.2 NAME	-		
STREET ADDRESS	• .	ļ:	2.3 STREE	TADDRESS	•	
CITY+ST-ZIP			2. 4 CITY - S	ST-ZIP		Change Addition
TITLE			3.1 TITLE	.		
NAME			3.2 NAME	ļ		
STREET ADDRESS				TADDRESS		
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP		Change Addition
TITLE .			4.1 TITLE		· · · · · · · · · · · · · · · · · · ·	3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
NAME	age of the second		4, 2 NAME		• • • • • • • • • • • • • • • • • • • •	
STREET ADDRESS	, fy	•		TADDRESS	4	400
CITY-ST-ZIP			4.4 CITY-S	SI-ZIP	·	Change Addition
TITLE			5.1 TITLE 5.2 NAME		•	
NAME				T ADDRESS	•	•
STREET ADDRESS			5.4 CITY-5	- 1		
CITY-ST-ZIP			6.1 TITLE)1-ZIF	<u> </u>	☐ Change ☐ Addition
TITLE			62 NAME		•	
NAME	**************************************			T ADDRESS		
STREET ADDRESS	lander of the control		e.a orner	, AUDINESS		-

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.