2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J98607



FILED Feb 05, 2007 08:00 AM Secretary of State

GARY S. BAILEY, INC.

Principal Place of Business 162 LEE DRIVE SOUTH

MIDDLEBURG, FL 32068

Mailing Address

162 LEE DRIVE SOUTH

US MIDDLEBURG, FL 32068



01082007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2856338

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

BAZLEY, JAMES A. 1730 KINGSLEY AVENUE SUITE A ODANCE DADK EL 22072

DO NOT WRITE IN THIS SPACE

ORANGE	FARR, PL 320/3						
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 Signature, typed or printed name of registered agent and title if apolicable (NOTE Registered Agent signature required when remistang) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finan Trust Fund Contribution.	icing	\$5.00 May Be Added to Fees	U0000 02/08/07	0619410 -80072-002	150.00
10.	OFFICERS AND DIREC	CTORS	5 次表 1	Watte Street	70144 118.	Transfer to	30 1 Sept 2
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BAILEY, GARY S. 162 LEE DR. SOUTH MIDDLEBURG, FL						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BAILEY, PAMELA J. 162 LEE DR. SOUTH MIDDLEBURG, FL						
NAME STREET ADDRESS CITY-ST-ZIP				#OCHANIC ABOUT	NOT V	1. P. W. A. A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS S	PACE	
NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby certify that the information supplied with his filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information							

indicated on this report or supplemental report of the corporation or the receiver or function 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 function and accurate 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.

904.291.2291