## 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 # K60932**

1. Corporation Name

CUSTOM MOBILITY, INC.

Principal Place of Business

Mailing Address

## FILED Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90093 036 \*\*\*150.00



1 molpai i lace	0 0. Edoineou								
12345 STARKEY LARGO FL 3464	r road suite e <del>13 -</del>	12345 STARKEY ROAD SUITE LARGO FL <del>34843</del>	E						
	- 1. 1.4			L.,	D	O NOT WRITE	IN THIS	SPACE	
	ZIP CHANGE ON	ILY		3	<ol> <li>Date Incorporated 01/25/1989</li> </ol>	or Qualifed			
2. Principal Pl	lace of Business	2a. Mailing Address		4	. FEI Number		•		Applied For
	5 STARKEY ROAD	26 12345 STARK	EY ROL	AD	59-2924116				Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	(6) ((0)	i				\$8.7	5 Additional
		27 SUITE E		5	5Certifcate of Statu	s Desired			Required
City & State		City & State		1.	3. Election Campaign	n Financina		\$5.0	00 May Be
		- 1000 T	•	1 5	Trust Fund Contril			•	ed to Fees
23   LARG	· · · · · · · · · · · · · · · · · · ·	Zip Zip	Country				t vons Inte		
Zip ⊋3.7 <b>23</b> 7	773 [25] Country	29 <sup>25</sup> 33773 30	<b>-</b>		<ol> <li>This corporation of Personal Property</li> </ol>			Yes	XΝο
24 5 5	9. Name and Address of Currer	23	, , , , , , , , ,		). Name and Addre		gistered A	Agent	
	9, Name and Address of Conten	it tradiateled Adelit	81 Na	ame	V. VV		<u> </u>	<u></u>	
BAYE	es, Bruce d.								
1108	5 4TH STREET EAST		<b>82</b> St	82 Street Address (P.O. Box Number is Not Acceptable)					
TREA	ASURE ISLAND FL 33706		83			,			. , ; .
1 2:	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		84 Ci	ity	,		FL	85 2	'ip Code :
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	the above-na	med corporati	on submits this state	ment for the pi	urpose of o	changing	its registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was auth	iorized by the	corporation's I	board of directors. It	nereby accept	tne appoin	itment as	s registerea
agont. 7 a	in familiar with, and accept the obliga	Mons of occupit our seco, i forte							
SIGNATURE				and the second when	n minetating)	***	DATE		<u> </u>
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: Re	egistered Agent sign	nature required when		GES TO OFFI	DATE CERS AN	D DIREC	CTORS IN 12
SIGNATURE	Stgnature, typed or printed name of registered age OFFICERS AN	ont and title if applicable. (NOTE: Re	egistered Agent sign		n reinstating) ADDITIONS/CHAN	GES TO OFFI			
SIGNATURE  12.  TITLE	Signature, typed or printed name of registered age OFFICERS AP	ent and title if applicable. (NOTE: Re	13.	DP		GES TO OFFI		D DIREC	
SIGNATURE  12.  TITLE  NAME	Signature, typed or printed name of registered age OFFICERS AND DV BAYES, BRUCE D.	ont and title if applicable. (NOTE: Re	egistered Agent sign 13. 1.1 TITLE 1.2 NAME	DP		GES TO OFFI			
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AND DV BAYES, BRUCE D. 11085 4TH ST. E.	ont and title if applicable. (NOTE: Re	egistered Agent sign 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD	<b>DP</b>		GES TO OFFI			
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN  DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL	int and title if applicable. (NOTE: Re ND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP	<b>DP</b>		GES TO OFFI		Char	ge 🔲 Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN  DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS	ont and title if applicable. (NOTE: Re	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE	<b>DP</b>		GES TO OFFI			ge 🔲 Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN  DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS BAYES, JUDITH E.	int and title if applicable. (NOTE: Re ND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP	<b>DP</b>		GES TO OFFI		Char	ge 🔲 Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Signature, typed or printed name of registered age OFFICERS AN  DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS BAYES, JUDITH E. 11085 4TH ST. E.	int and title if applicable. (NOTE: Re ND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE	DP PRESS		GES TO OFFI		Char	ge 🔲 Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	Signature, typed or printed name of registered age OFFICERS AN  DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL  DS BAYES, JUDITH E. 11085 4TH ST. E. TREASURE ISLAND FL	INI and title if applicable. (NOTE: Re ND DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	DP PRESS		GES TO OFFI		Chan	ge Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN  DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS BAYES, JUDITH E. 11085 4TH ST. E.	int and title if applicable. (NOTE: Re ND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD	DP PRESS		GES TO OFFI		Char	ge Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN  DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL  DS BAYES, JUDITH E. 11085 4TH ST. E. TREASURE ISLAND FL	INI and title if applicable. (NOTE: Re ND DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP	DP PRESS		GES TO OFFI		Chan	ge Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AN DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL. DS BAYES, JUDITH E. 11085 4TH ST. E. TREASURE ISLAND FL. DPT	INI and title if applicable. (NOTE: Re ND DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE	DP PRESS		GES TO OFFI		Chan	ge Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS BAYES, JUDITH E. 11085 4TH ST. E. TREASURE ISLAND FL DPT COLE, WILLIAM J.	INI and title if applicable. (NOTE: Re ND DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	DP  PRESS  PRESS		GES TO OFFI		Chan	ge Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS BAYES, JUDITH E. 11085 4TH ST. E. TREASURE ISLAND FL DPT COLE, WILLIAM J. 120 PALMETTO LANE	INI and title if applicable. (NOTE: Re ND DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD	DP  PRESS  PRESS		GES TO OFFI		Chan	ge Addition  ge Addition  ge Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS BAYES, JUDITH E. 11085 4TH ST. E. TREASURE ISLAND FL DPT COLE, WILLIAM J. 120 PALMETTO LANE	Int and title if applicable. (NOTE: Re ND DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP	PRESS DT DOL	ADDITIONS/CHAN	omas	CERS AN	Char	ge Addition  ge Addition  ge Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	Signature, typed or printed name of registered age OFFICERS AN DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS BAYES, JUDITH E. 11085 4TH ST. E. TREASURE ISLAND FL DPT COLE, WILLIAM J. 120 PALMETTO LANE	Int and title if applicable. (NOTE: Re ND DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE	PRESS DT DOL	ADDITIONS/CHAN	omas	CERS AN	Char	ge Addition  ge Addition  ge Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS BAYES, JUDITH E. 11085 4TH ST. E. TREASURE ISLAND FL DPT COLE, WILLIAM J. 120 PALMETTO LANE	Int and title if applicable. (NOTE: Re ND DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	PRESS PRESS DT D.O.L. 31660	ADDITIONS/CHAN	omas	CERS AN	Char	ge Addition  ge Addition  ge Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	Signature, typed or printed name of registered age OFFICERS AN DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS BAYES, JUDITH E. 11085 4TH ST. E. TREASURE ISLAND FL DPT COLE, WILLIAM J. 120 PALMETTO LANE	Int and title if applicable. (NOTE: Re ND DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADD	DP  ORESS  ORESS  DT  DOL  3666  LAR	ADDITIONS/CHAN	OMAS Dr. APT	CERS AN	Char	ge ☐ Addition  ge ☐ Addition  ge ☐ Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Signature, typed or printed name of registered age OFFICERS AN DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS BAYES, JUDITH E. 11085 4TH ST. E. TREASURE ISLAND FL DPT COLE, WILLIAM J. 120 PALMETTO LANE	INT and title if applicable. (NOTE: Re ND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADD 4.4 CITY-ST-ZIP 4.1 STREET ADD	PRESS	ADDITIONS/CHAN	OMAS DR. APT 33771	CERS AN	Char	ge ☐ Addition  ge ☐ Addition  ge ☐ Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	Signature, typed or printed name of registered age OFFICERS AN DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS BAYES, JUDITH E. 11085 4TH ST. E. TREASURE ISLAND FL OPT COLE, WILLIAM J. 120 PALMETTO LANE LARGO FL	INT and title if applicable. (NOTE: Re ND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADD 4.4 CITY-ST-ZIP 5.1 TITLE	PRESS PRESS DT D.O.L. 3660 LAR DV RESS	ADDITIONS/CHAN	OMAS Dr. APT 33771 W.	CERS AN	Char	ge ☐ Addition  ge ☐ Addition  ge ☐ Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS BAYES, JUDITH E. 11085 4TH ST. E. TREASURE ISLAND FL OPT COLE, WILLIAM J. 120 PALMETTO LANE LARGO FL	INT and title if applicable. (NOTE: Re ND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADD 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	PRESS	ADDITIONS/CHAN  IN E THE  EAST BAY  GO, FL  ES. GARY	OMAS Dr. APT 33771 W.	726	Char	ge ☐ Addition  ge ☐ Addition  ge ☐ Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS BAYES, JUDITH E. 11085 4TH ST. E. TREASURE ISLAND FL OPT COLE, WILLIAM J. 120 PALMETTO LANE LARGO FL	INT and title if applicable. (NOTE: Re ND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADD 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADD	PRESS	EAST BAY GO, FL	OMAS Dr. APT 33771 W.	726	Char	ge ☐ Addition  ge ☐ Addition  ge ☐ Addition  ge ☐ Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Signature, typed or printed name of registered age OFFICERS AN DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS BAYES, JUDITH E. 11085 4TH ST. E. TREASURE ISLAND FL OPT COLE, WILLIAM J. 120 PALMETTO LANE LARGO FL	INI and title if applicable. (NOTE: Re ND DIRECTORS  DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADD 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADD 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADD 5.4 CITY-ST-ZIP	PRESS	EAST BAY GO, FL	OMAS Dr. APT 33771 W.	726	Char	ge ☐ Addition  ge ☐ Addition  ge ☐ Addition  ge ☐ Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AND DV BAYES, BRUCE D. 11085 4TH ST. E. TREASURE ISLAND FL DS BAYES, JUDITH E. 11085 4TH ST. E. TREASURE ISLAND FL OPT COLE, WILLIAM J. 120 PALMETTO LANE LARGO FL	INI and title if applicable. (NOTE: Re ND DIRECTORS  DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADD 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADD 5.4 CITY-ST-ZIP 6.1 TITLE 6.1 TITLE	PRESS	EAST BAY GO, FL	OMAS Dr. APT 33771 W.	726	Char	ge ☐ Addition  ge ☐ Addition  ge ☐ Addition  ge ☐ Addition

6.4 CITY-ST-ZIP 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.

MOITH E. BAYES

(727) 539-8119 X 318