

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L67471 (7)

1. Corporation Name

BAY PLAZA DEVELOPMENT GROUP, INC.



Principal Place of Business

25 2ND STREET NORTH
SUITE 300
ST. PETERSBURG FL 33701

Mailing Address

25 2ND STREET NORTH
SUITE 300
ST. PETERSBURG FL 33701

2. Principal Place of Business

21

Suite, Apt. #, etc.

Suite 400

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite 400

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

HARRELL, ROY G JR
100 2ND AVE SOUTH
SUITE 1202
ST. PETERSBURG FL 33701

3. Date Incorporated or Qualified

04/24/1990

3a. Date of Last Report

04/26/1995

4. FEI Number

43-1574781

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when translating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD
NAME MCCARTHY, LYNN L ☒ DELETE
STREET ADDRESS 25 2ND ST N 300
CITY-ST-ZIP ST PETERSBURG FL

TITLE ETSD
NAME JAMES, WALTER C ☒ DELETE
STREET ADDRESS 25 2ND ST N 300
CITY-ST-ZIP ST PETERSBURG FL

TITLE PD
NAME FOX, JOHN H ☐ DELETE
STREET ADDRESS 5612 TAHOE LANE
CITY-ST-ZIP SHAWNEE MISSION KS

TITLE VASD
NAME VAN BUTSEL, MICHAEL R ☐ DELETE
STREET ADDRESS 25 2ND ST N 800X #400
CITY-ST-ZIP ST PETERSBURG FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Chairman ☐ Change ☒ Addition
1.2 NAME Barrett Brady
1.3 STREET ADDRESS 5317 Mission Woods Terrace
1.4 CITY-ST-ZIP Shawnee Mission, KS 66205

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 700001810687
4.4 CITY-ST-ZIP -05/07/96--01025--040

5.1 TITLE ***200.00 ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John H. Fox, President

4/10/96
Date

(816) 561-3456
Daytime Phone #

CR2E034 (12/95)