

~~FILE NOW. FILING FEE AFTER MAY 11: \$550.00~~

FILED

98 APR -7 AM 11:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<p><b>LLC</b></p> <p><b>1997 1998</b></p>		<p>FLORIDA DEPARTMENT OF STATE</p> <p>Sandra B. Mortham Secretary of State</p> <p>DIVISION OF CORPORATIONS</p>	
<p><b>DOCUMENT # L97 0000000 32</b></p> <p>1. Corporation Name</p> <p><b>Bay Investments of Palm Coast, LC.</b></p>			
<p>Principal Place of Business</p> <p>1 Florida Park Drive Suite 350 Palm Coast, FL 32137</p>		<p>Mailing Address</p> <p>1 Florida Park Drive Suite 350 Palm Coast, FL 32137</p>	
<p>2. Principal Place of Business</p> <p>21 Suite, Apt. #, etc.</p> <p>22 City &amp; State</p> <p>23 Zip</p> <p>24 Country</p>		<p>2a. Mailing Address</p> <p>26 Suite, Apt. #, etc.</p> <p>27 City &amp; State</p> <p>28 Zip</p> <p>29 Country</p>	
<p>3. Date Incorporated or Qualified</p> <p>1/7/97</p>		<p>3a. Date of Last Report</p>	
<p>4. FEI Number</p> <p>04-3346951</p>		<p>Applied For</p> <p>Not Applicable</p>	
<p>5. Certificate of Status Desired</p> <p><input type="checkbox"/> \$8.75 Additional Fee Required</p>		<p>6. Election Campaign Financing</p> <p>Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees</p>	
<p>7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p>8. Name and Address of Current Registered Agent</p> <p>Corporation Services Company 1201 Hays Street Tallahassee, FL 32301-2525</p>	
<p>9. Name and Address of New Registered Agent</p> <p>81 Name</p> <p>82 Street Address (P.O. Box Numbers Not Acceptable)</p> <p>83 City</p> <p>84 Zip Code</p>		<p>10. Name and Address of New Registered Agent</p> <p>81 Name</p> <p>82 Street Address (P.O. Box Numbers Not Acceptable)</p> <p>83 City</p> <p>84 Zip Code</p>	
<p>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, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.</p> <p>SIGNATURE: <u>Haren B. Rozar</u> <u>Haren B. Rozar as its agent</u> <u>4-6-98</u></p> <p>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</p>			
<p>12. OFFICERS AND DIRECTORS</p> <p>TITLE</p> <p>NAME</p> <p>STREET ADDRESS</p> <p>CITY - ST - ZIP</p>		<p>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</p> <p>1.1 TITLE</p> <p>1.2 NAME</p> <p>1.3 STREET ADDRESS</p> <p>1.4 CITY - ST - ZIP</p>	
<p><del>President</del> <u>MGRM</u> <input type="checkbox"/> DELETE</p> <p>Kaan, Valerie</p> <p>1 Florida Park Drive</p> <p>Palm Coast, FL 32137</p>		<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>	
<p><del>Director</del> <u>MGRM</u> <input type="checkbox"/> DELETE</p> <p>Kaan, Gloria</p> <p>1 Florida Park Drive</p> <p>Palm Coast, FL 32137</p>		<p>2.1 TITLE</p> <p>2.2 NAME</p> <p>2.3 STREET ADDRESS</p> <p>2.4 CITY - ST - ZIP</p>	
<p><input type="checkbox"/> DELETE</p>		<p>3.1 TITLE</p> <p>3.2 NAME</p> <p>3.3 STREET ADDRESS</p> <p>3.4 CITY - ST - ZIP</p>	
<p><input type="checkbox"/> DELETE</p>		<p>4.1 TITLE</p> <p>4.2 NAME</p> <p>4.3 STREET ADDRESS</p> <p>4.4 CITY - ST - ZIP</p>	
<p><input type="checkbox"/> DELETE</p>		<p>5.1 TITLE</p> <p>5.2 NAME</p> <p>5.3 STREET ADDRESS</p> <p>5.4 CITY - ST - ZIP</p>	
<p><input type="checkbox"/> DELETE</p>		<p>6.1 TITLE</p> <p>6.2 NAME</p> <p>6.3 STREET ADDRESS</p> <p>6.4 CITY - ST - ZIP</p>	

14. I do 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.

SIGNATURE: Valerie Kaan

3/12/98 904 446 8100

CR2E034 (9/96)