

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2007 8:00 am
Secretary of State

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DOCUMENT # M86916			
1. Entity Name BATHEASE, INC.			
Principal Place of Business 3815 DARSTON STREET PALM HARBOR, FL 34685-3119		Mailing Address 3815 DARSTON STREET PALM HARBOR, FL 34685-3119	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-2897298		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FITZGERALD, THOMAS J. 3815 DARSTON STREET PALM HARBOR, FL 34685-3119		7. Name and Address of New Registered Agent Name Maryellen Fitzgerald Street Address (P.O. Box Number is Not Acceptable) 3815 Darston Street City Palm Harbor FL Zip 34685	
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: <i>Maryellen Fitzgerald</i> President DATE: 3/1/2007			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '07	
TITLE NAME STREET ADDRESS CITY ST ZIP	D BOWERSOX, JACK 2424 CURLEW RD PALM HARBOR, FL 34683 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	Vice President ALISON FITZGERALD 3815 Darston Street Palm Harbor FL 34684 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D LEEDS, FRANK III 2301 THIRD AVE S SAINT PETERSBURG, FL 33712 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	Vice President 10476 E. Quaker Rock Rd Sioux Falls SD 57255 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	DP FITZGERALD, THOMAS J 3815 DARSTON ST PALM HARBOR, FL 34685 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	PRESIDENT DIRECTOR MARY E. FITZGERALD 3815 DARSTON STREET PALM HARBOR FL 34685 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Maryellen Fitzgerald</i> MARY ELLEN FITZGERALD		2-807 727-786-2604	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE	