

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2007 8:00 am
Secretary of State

04-19-2007 90214 034 ****61.25

DOCUMENT # N06000011226 1. Entity Name BAY TAX FOUNDATION, INC.					
Principal Place of Business 4116 HIGHWAY 231 NORTH PANAMA CITY FL 32404			Mailing Address P.O. BOX 59462 PANAMA CITY FL 32412		
2. Principal Place of Business - No P.O. Box # 433 Oak Avenue		3. Mailing Address Suite, Apt. #, etc.			
City & State Panama City, FL		City & State		4. FEI Number 20-5800641	
Zip 32401		Country US		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HILTON, JR., L. CHARLES 4116 HIGHWAY 231 NORTH PANAMA CITY FL 32404				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature is required when terminating) Signature, typed or screen name of registered agent and title if applicable					
FILE NOW: FEE IS \$81.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D BURNHAM, WES 11212 FRONT BEACH ROAD PANAMA CITY BEACH FL 32407	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D FAIRCLOTH, CHARLES 460 HARRISON AVENUE PANAMA CITY FL 32401	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D FLEMING, CLIFF 800 CHERRY STREET PANAMA CITY FL 32401	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D FOISTER, JUDY 10801 HIGHWAY 231 PANAMA CITY BEACH FL 32407	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D GRANT, WES 219 MOONLIGHT DRIVE PANAMA CITY BEACH FL 32407	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D HILTON, JR., L. CHARLES 4116 HIGHWAY 231 NORTH PANAMA CITY FL 32404	☐ Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 617, 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: _____ CLC HILTON JR D 2/28/07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					