

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morthorn Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N32809 (8)
1. Corporation Name
BAY AREA HEARTS OF GOLD, INC.

FILED
95 JUL -7 AM 8:48
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business
P.O. BOX 10247
ST. PETERSBURG FL 33733

Mailing Address
P.O. BOX 10247
ST. PETERSBURG FL 33733

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/13/1989	3a. Date of Last Report 02/16/1994
4. FEI Number 59-2939389	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$0.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

BARNES, GLADYS H.
4229 9TH AVE., SOUTH
ST. PETERSBURG FL 33711-2030

10. Name and Address of New Registered Agent

81 Name VERNELL YOUNG	82 Street Address (P.O. Box Number is Not Acceptable) 4327 14th AVE SO	83	84 City ST. PETERSBURG	85 FL	86 Zip Code 33711
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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 office familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: VERNELL YOUNG (NOTE: Registered Agent signature required when resigning)
DATE: 7-1-95

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SHERROD, EULA 600 NEWTON AVE., SOUTH ST. PETERSBURG FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD POSTELL, FRANK 3794 53RD AVE., SOUTH ST. PETERSBURG FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BARNES, GLADYS 4229 9TH AVE., SOUTH ST. PETERSBURG FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BALWIN, ROSA 3437 17TH AVE. S. ST. PETERSBURG FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PCD ALEXANDER, JENIAL 1834 44TH ST. S. ST. PETERSBURG FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	☐ Change ☐ Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	VD Alfred CONAGE 4327 14th AVE SO. ST. PETE, FL 33711 ☒ Change ☐ Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	SD VERNELL YOUNG 4327 14th AVE SO ST. PETE, FL 33711 ☒ Change ☐ Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	☐ Change ☐ Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	PCD HENRIETTA WILSHARD 2435 3RD AVE SO. ST. PETE, FL 33712 ☒ Change ☐ Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	☐ Change ☐ Addition

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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: VERNELL YOUNG VERNELL YOUNG (SECRETARY) 5-15-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

813-323-7344
0048816