2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Due 5/1/0

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # N40892

1. Entity Name
BAY AREA COMMUTER SERVICES, INC.

Principal Place of Business	Mailing Address
1408 N. WESTSHORE BLVD. #704 TAMPA, FL 33607	1408 N. WESTSHORE BLVD. #704 TAMPA, FL 33607

DO NOT WRITE IN THIS SPACE

01102006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-3050472

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MOODY, SANDRA L
1408 N. WESTSHORE BLVD.
SUITE 704
TAMPA, FL 33607

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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: Sandra L. Moody SANDRA L. MOODY 4/5/06
Signature (typed or printed name of registered agent and title if applicable.) (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CD
NAME	REED, HARRY D III
STREET ADDRESS	7650 W COURTNEY CAMPBELL CSWY
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	TT
NAME	CAPPADORO, JILL
STREET ADDRESS	201 E. KENNEDY BLVD, SUITE 900
CITY-ST-ZIP	TAMPA, FL 33602
TITLE	S
NAME	WOODROFFE, ENRIQUE A
STREET ADDRESS	5005 W. LAUREL STREET, STE. 215
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	VD
NAME	TRIA, LEONARD F JR
STREET ADDRESS	8448 DELAWARE DR
CITY-ST-ZIP	WEEKI WACHEE, FL 34607
TITLE	ED
NAME	MOODY, SANDRA L.
STREET ADDRESS	1408 N. WESTSHORE BLVD # 704
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/26/06-80112-023 61.25

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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 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: Sandra L. Moody Sandra L. Moody 4/5/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #