

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 11, 2011
Secretary of State

Entity Name: BAYCARES, INCORPORATED

Current Principal Place of Business:

597 W. 11TH ST
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

PO BOX 181
PANAMA CITY, FL 32401

New Mailing Address:

FEI Number: 59-3155410

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUKE, GEORGE
597 W 11TH STREET
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: WARD, JON DR.
Address: 2505 HARRISON AVENUE
City-St-Zip: PANAMA CITY, FL 32405

Title: P
Name: DUNN, NEAL DR.
Address: 80 DOCTORS DRIVE
City-St-Zip: PANAMA CITY, FL 32405

Title: VP
Name: MAKKI, ACHRAF DR.
Address: 2202 STATE AVENUE; SUITE 201
City-St-Zip: PANAMA CITY, FL 32405

Title: D
Name: KHARE, GHEETA DR.
Address: 2687 JENKS AVE
City-St-Zip: PANAMA CITY, FL 32405

Title: D
Name: ELZAWAHRY, KAMEL DR
Address: 2202 STATE AVE; SUITE 201
City-St-Zip: PANAMA CITY, FL 32405

Title: D
Name: MAKKI, ACHRAF DR.
Address: 2202 STATE; SUITE 201
City-St-Zip: PANAMA CITY, FL 32405

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: M A DUKE GEORGE

COOR

03/11/2011

Electronic Signature of Signing Officer or Director

Date