2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9600000117 May 17, 2000 8:00 am Secretary of State 1. Entity Name BAY SAILORS, INCORPORATED 03-15-2000 90065 024 ****61.25 Principal Place of Business Mailing Address 4119 MURIEL PLACE PO BOX 47396 **TAMPA FL 33614** ST PETE FL 33743-7396 400000 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number NOT APPLICABLE Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) BORDERS, CAROLYN T 2602 CLARK RD **TAMPA FL 33618** City Zip Code FI 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 DATE 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition [VD ☐ Delete ☐ Channe TITLE TITLE NAME DUKE, GINI NAME STREET ADDRESS STREET ADDRESS 2521 51 ST S. CITY-ST-ZIP CITY-ST-ZIP **GULFPORT FL 33707** MARY Stoltz 2583 County side Blud # 3107 Change Addition Delete TITLE TITLE NAWROCKI, TONY NAME NAME STREET ADDRESS STREET ADDRESS P. O. BOX 48283 Clearwater .fl. 33761 CITY-ST-ZIP CITY-ST-7IP ST. PETERSBURG FL 33743 Change ☐ Addition Daiete TITLE SD JEAN PelleGRINI TITLE NAME SMITH, LOIS NAME 2554 West Brook Lame STREET ADDRESS STREET ADDRESS 4964 HUNTINGTON ST NE. Clearwater, \$1.33761 CITY-ST-ZIP CITY-ST-ZIP ST PETE FL Change Addition TD ☐ Delete TITLE TO TITLE JUDITA BUTERA BUTERA, JUDITH NAME NAME 8057 Calescully Blus & ST. Pateraburg # 33707 STREET ADDRESS 8051 CAUSEWAY BLVD S. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST PETE FL 33707 RESTOR SALLY McCONNELL A Delete Changa ☐ Addition TITLE TIBE NAME HIGA, CARLA NAME 11561 484 Aug No. STREET ADDRESS STREET ADDRESS 1327 WINDJAMMER ST Peteressurg, 41-33708 CITY-ST-ZIP CITY-ST-ZIP VALRICO FL 33594 Jon OWER AChange 450 TREASURE 18/ Causeway # 605 Addition 🛍 Delete SELKE, RONALD NAME STREET ADDRESS STREET ADDRESS PO BOX 204 TREASURE 181. FT. 33706 CITY-ST-ZIP CITY-ST-ZIP ST PETE FL 33731

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 817, 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:

SIGNATURE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Cavrima Phona #