FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N96000002049 (2) DOCUMENT # 1. Corporation Name

"BAYMED STAFFING INC."

Principal Place of Business		Mailing Address			-	i Dilla Marill Allılın 1484 (C. 68)40 (11019 1011 1001
615 NORTH BONITA AVENUE PANAMA CITY FL 32401		615 NORTH BONITA AVEN PANAMA CITY FL 32401-36					
					3. Date Incorporated or Qualified 04/16/1996	3a. Date of Last	Report
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	L A	opplied For	
21 26			·····		59-3375726		lot Applicable
		<u> </u>	Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional
City & State	0	City & State			& Cination Companies Cinamina		Required
23		28			Election Campaign Financing Trust Fund Contribution) May Be I to Fees
Zip	Country	Zip	Country		8. This corporation has liability for		
24	25	29	30			Yes No	D. 100100ki,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	egistered Agent	
			81	Name			
MILLER, R D				Street Addre	ss (P.O. Box Number is Not Acceptal	ble)	
615 NORTH BONITA AVENUE					•		
PANAMA	CITY FL 32401		83				
•			84	City		85 Zip	Code
•11. Pursuant	40.47.00	00 1047 4500 51 11 0				FL FL	
	egistered agent, or both, in the Stat m familiar with, and accept the obliq	e of Florida. Such change was gations of, Section 617.0503, Fl	authorized by the orida Statutes.	ne corporation	oration submits this statement for the points board of directors. I hereby acce	pt the appointment as	s registered
SIGNATURE .	Signature, typed or printed name of registered as	gent and title if applicable. (NO	E Registered Agent	signature require	d when reinstating)	DATE	
12.	··· <u>···</u> ··	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTO	
TITLE	D	☐ DELETE	1.1 TITLE		D	☐ Change	Addition
NAME CHAPMAN, JOSEPH F III		NOI P	1.2 NAME		Tommy M. Cool	-	
STREET ADDRESS 3412 ROBINSON BAYOU CIRCL		IULE	1.3 STREET AODRESS		2229 Joan Ave		
CITY-ST-ZIP	PANAMA CITY FL 32405	- Drive	1.4 City-St-	ZVP	Panama City B		32407
TITLE	d Bennett, Derrick G III	☐ DELETE	2.1 TITLE		Michael T. Ha	rding Change	Addition
NAME STREET ADDRESS	AND AIRPORT AIRS E OLE		2.2 NAME	BDF00	637 Luverne A	_	
CITY-SI-ZIP PANAMA CITY FL 32405			2.3 STREET AL		Panama City,		
TITLE	D	DELETE	2. 4 CITY-ST- 3.1 TITLE	287	D	Change	Addition
NAME	BRUDNICKI, GREGORY M III		3.2 NAME				- Nontrain
STREET ADDRESS	2770 TRACY LANE		3.3 STREET ADDRESS		Rodney C. Mor. 806 E. Sixth	Street	
City-St-ZIP	PANAMA CITY FL 32405		3.4. CITY-ST-		Panama City.		
TITLE	D DELETE		4.1 TITLE		1 mmanua verry 1	Change	Addition
NAME	BURCH, HATTIE B		4. 2 NAME			•	
STREET ADDRESS	1002 MAPLE AVENUE		4.3 STREET AD	DRESS			
CITY-ST-Z#P	PANAMA CITY FL 32405		4.4 City-St-	ZIP .			
TITLE	D DELETE		5.1 TITLE			☐ Change	☐ Addition
NAME	stringer, douglas l		5.2 NAME				
STREET ADDRESS	2139 BRIARWOOD CIRCLE		5.3 STREET AL	DRESS			
CITY-ST-ZIP	PANAMA CITY FL 32405		5.4 CITY-ST-	riP			
TITLE	D	☐ DELETE	6.1 TITLE			☐ Change	■ Addition
NAME	DICK, ANNE H		6.2 NAME				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 corografion or the receive or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if ghanged, or or legically himsent with an address. 904/747-6917

6.3 STREET ADDRESS

FILED

Feb 17 1997 8:00am

Secretary of State

SIGNATURE:

STREET ADDRESS

414 BUNKERS COVE ROAD

PANAMA CITY FL 32401

Richerck Miller, Secretary/Treas.