## . 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## May 04, 2006 8:00 am Secretary of State DOCUMENT # N96000005155 1. Entity Name 05-04-2006 90204 044 \*\*\*\*61.25 BAY AREA DEVELOPMENT GROUP, INC. Mailing Address Principal Place of Business 8021 SAILBOAT KEY BLVD 8021 SAILBOAT KEY BLVD. D 403 S. PASADENA FL 33707 S PASADENA FL 33707 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) Applied For City & State City & State 4. FEI Number 59-3404364 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HALE, FRED H Street Address (P.O. Box Number is Not Acceptable) 5369 PARK BLVD. PINELLAS PARK FL:33781 Zip Code 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 Signature, typod or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE Addition SOREM, LINDA NAME NAME 8021 SAILBOAT KEY BLVD.-D 403 STREET ADDRESS STREET ADDRESS S. PASADENA FL 33707 City-St-ZIP CITY-ST-ZIP VP ☐ Delete TITLE THEF Change Change ■ Addition MELVIN, SOREM NAME NAME STREET ADDRESS 8021 SAILBOAT KEY BLVD., D-403 STREET ADDRESS S. PASADENA FL 33707 CITY-ST-ZIP CITY-ST-ZIP RAT ☐ Delete TITLE ☐ Addition NAME HALE, FRED H NAME 5369 PARK BLVD STREET ADDRESS STREET ADDRESS PINELLAS PARK FL 33781 CITY-ST-ZIP CITY-ST-ZIP T JENNIFER VASQUEZ JENNIFER VASQUEZ JENNIFER VASQUEZ JENNIFER VASQUEZ JENNIFER VASQUEZ Delete **X** Addition TITLE TITLE NAME FERACO, RICHARD NAME 9414 TRADEWINDS AV STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SEMINOLE FL 33776 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition ROSE, DONALD A JR NAME NAME 8018 DEERWOOD CIRCLE STREET ADDRESS STREET ADDRESS TAMPA FL 33610 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

**FILED** 

if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Junder Sorem LINDA SOREM HM-06 727-367-9434

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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