

2001 UNIFORM BUSINESS REPORT (UBR)

0102337 AV

DOCUMENT # P00000013399

1. Entity Name
BAY WEST APPRAISAL SERVICES, INC.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 NOV -5 PM 3:43

Principal Place of Business

566 BAYWOOD DRIVE SOUTH 2575 Harn Blvd.
DUNEDIN FL 34698 Suite B

Mailing Address

566 BAYWOOD DRIVE SOUTH 2575 Harn Blvd.
DUNEDIN FL 34698 Suite B



2. Principal Place of Business

2575 Harn Blvd
Suite B

3. Mailing Address

2575 Harn Blvd
Suite B

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Clearwater

City & State

Clearwater

Zip

33764

Country

USA

Zip

33764

Country

USA

4. FEI Number

59-3623377

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name RHONDA R. LEVINE
Street Address (P.O. Box Number is Not Acceptable)
441 21ST AVENUE N
City ST. PETERSBURG, FL Zip Code 33704

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.

SIGNATURE RHONDA R. LEVINE
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

10/30/01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PTD
NAME LEVINE, RHONDA R
STREET ADDRESS 566 BAYWOOD DRIVE SOUTH
CITY-ST-ZIP DUNEDIN FL 34698

TITLE SVD
NAME DEUFEL, BETHANN
STREET ADDRESS 566 BAYWOOD DRIVE SOUTH
CITY-ST-ZIP DUNEDIN FL 34698

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
441 21ST AVENUE N
ST PETERSBURG, FL 33704

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
200004698322-5
-11/29/01--01048--025
****750.00 ****750.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I 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 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 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

10/30/01

Date

727-530-5177

Daytime Phone #

CR2E034 (5/01)