

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000043252

1. Entity Name
BAYSIDE SHIRT COMPANY



FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 APR 16 AM 11:02

Principal Place of Business
4786A WOODLANE CIRCLE
TALLAHASSEE, FL 32303

Mailing Address
P.O. BOX 98
PANACEA, FL 32346



03062004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3652666	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCDONALD, ROBERT B
195 MASHES SAND RD
PANACEA, FL 32346

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MCDONALD, ROBERT B 195 MASHES GRAND ROAD PANACEA, FL 32346
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS WELLS, BRIAN 314 BRAVADO LANE PALM BEACH SHORES, FL 33404
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPM MCDONALD, MARK B 3603 BUCKNER COURT TALLAHASSEE, FL 32313
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

800033722428
04/23/04--01022--020 **8.75

800033722428
04/23/04--01022--021 **150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert B. McDonald ROBERT B. MCDONALD 4-16-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

TR