

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000079033

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: BABY GUARD OF TAMPA BAY, INC.

## Current Principal Place of Business:

5442 JET VIEW CIRCLE  
BLDG. 504  
TAMPA, FL 33635

## New Principal Place of Business:

5442 JET VIEW CIRCLE  
BLDG. 504  
TAMPA, FL 33634

## Current Mailing Address:

5442 JET VIEW CIRCLE  
BLDG. 504  
TAMPA, FL 33635

## New Mailing Address:

5442 JET VIEW CIRCLE  
BLDG. 504  
TAMPA, FL 33634

FEI Number: 59-3665477

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BACCILI, PETE  
5442 JET VIEW CIRCLE  
BLDG. 504  
TAMPA, FL 33635

## Name and Address of New Registered Agent:

BACCILI, PETE  
5442 JET VIEW CIRCLE  
BLDG. 504  
TAMPA, FL 33634

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:

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: BACCILI, PETER E  
Address: 6116 SCHOONER WAY  
City-St-Zip: TAMPA, FL 33615

Title: SVD ( ) Delete  
Name: CLERMONT, JODY D  
Address: 6116 SCHOONER WAY  
City-St-Zip: TAMPA, FL 33615

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER BACCILI

PRES

04/30/2004

Electronic Signature of Signing Officer or Director

Date