


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000080076 1. Entity Name R K OF BAY COUNTY CORPORATION	
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Principal Place of Business 11004 FRONT BEACH ROAD PANAMA CITY, FL 32407	Mailing Address 11004 FRONT BEACH ROAD PANAMA CITY, FL 32407
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DO NOT WRITE IN THIS SPACE



04272006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3669094	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PATEL, HEMANT K
2210 S WAUKESHA ST
BONIFAY, FL 32425

**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 retesting) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	11000000550816 05/13/06-R0073-010 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PATEL, HEMANT K 2210 S WAUKESHA ST BONIFAY, FL 32425
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PATEL, SATISH 1720 BUSHRIVER RD COLUMBIA, SC 29210
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 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: *Hemant K Patel* **PRESIDENT** 4/27/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #