


2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90350 020 ***150.00

DOCUMENT # P01000056307	
1. Entity Name BUY THE BAY INVESTMENTS, INC.	

Principal Place of Business P.O. BOX 145 VALRICO, FL 33595-0145	Mailing Address P.O. BOX 145 VALRICO, FL 33595-0145
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DO NOT WRITE IN THIS SPACE

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03212004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3728218	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

CREAGER, LYNDON F JR
2208 SPYGLASS HILL CIR.
PO BOX 145
VALRICO, FL 33595-0145

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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** _____

Signature, typed or printed name of registered agent and title if applicable.

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	D CREAGER, LYNDON F JR 2208 SPYGLASS HILL CIRCLE VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CREAGER, LINDA L 2208 SPYGLASS HILL CIRCLE VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *Linda Creager* Director 3-25-04 813-684-2016

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #