## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000022445

Entity Name: BAUD PROPERTIES, INC.

FILED Jan 13, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2231 EAST 5TH STREET 2231 EAST 5TH STREET 206

206

LEHIGH ACRES, FL 33970 LEHIGH ACRES, FL 33972

**Current Mailing Address: New Mailing Address:** 

2231 EAST 5TH STREET 2231 EAST 5TH STREET 206

LEHIGH ACRES, FL 33970 LEHIGH ACRES, FL 33972

FEI Number: 04-0616011 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BAUD, MARIANNE BAUD, MARIANNE 2231 EAST 5TH STREET 2231 ÉAST 5TH STREET

206 206 LEHIGH ACRES, FL 33970 US LEHIGH ACRES, FL 33972 US

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:

01/13/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete Title: **PSTD** (X) Change ( ) Addition

BAUD, MARIANNE BAUD, MARIANNE Name: Name: 2231 EAST 5TH STREET, #206 2231 EAST 5TH STREET, #206 Address: Address:

City-St-Zip: LEHIGH ACRES, FL 33970 City-St-Zip: LEHIGH ACRES, FL 33972

( ) Delete Title: PRES Title: PRES (X) Change ( ) Addition Name: BAUD, MARIANNE Name: BAUD, MARIANNE 2231 E 5TH ST #206 Address: 2231 E 5TH ST #206 Address: LEHIGH ACRES, FL 33970 LEHIGH ACRES, FL 33972 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: MARIANNE BAUD **PRES** 01/13/2006