## 2003 FOR PROFIT CORPORATION / UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## FILED Mar 31, 2003 8:00 am Secretary of State

DOCUMENT # P02000055260  1. Entity Name BAYVIEW GROVE COMPANY, INC.								03-31-2003	90219 0	37 ***1	50.00
Principal Place of Business Mailing Address 713 84TH STREET N.W. 713 84TH STREET N.W. BRADENTON, FL 34209 BRADENTON, FL 34209											
Principal Place of Business     3. Mailing Address						$\neg$					
Sulte, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			City & State								at Applicable
Zip Country			Zip Cour		try	5. Certificate of Status Desired		\$8.75 Additional Fee Required			
Name and Address of Current Registered Agent								me and Address of New Re	gistered Ag	ent	
PEEBLES, DOUGLAS A						reet Address (P.O. Box Number is Not Acceptable)					
					City		<u></u>		FL	Zip Cod	e
	named entity tions of regist		the purpose of changing its	registere	led office or	registered	d ager	nt, or both, in the State of Flori		niliar with,	and accept
SIGNATURE	Signature, typed	Or printed name of registered agents	nd title if applicable. (NOT	: Reuisiere	d Agenteignati	une necurined wi	hen reins	\$12 (int.)	DATE		
ari Afte	FILE NOW r May 1, 200	ii FEE IS \$150.00 33 Fee will be \$550.00 5 Florida Department o		<del>_</del>				Election Campaign Final Trust Fund Contribution.			O May Be i to Fees
10.	are one suits this sale constraint	OFFICERS AND I	DIRECTORS	11.		·	ADD	TIONS/CHANGES TO OFFIC	ERS AND C	RECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZP	611 84TH	ALD, JACQUELINE STREET N.W. ON, FL 34209	☐ Deletæ	9		611 8	ona. 84tl	ld, Jacqueline h Street N.W. on, FL 34209	ļ	Change	Addition S
TITLE NAME STREET ADDRESS CITY-ST-2IP	PEEBLES, DOUGLAS A NAM 518 STREET N.W. STR			4	J	D/V Peeb1 603 8	bles, Douglas A. 84th Street N.W. denton, FL 34209				
TITLE NAME STREET ADDRESS CITY-ST-2P	PEEBLES, STEPHEN M 713 84TH STREET N.W.		Ħ	· [	D/P Peeb1 713 8				☐ Addition		
TITLE NA ME STREET ADDRESS CITY-ST-ZP			☐ Delete		- 1	V Peeb1 603 8	les, 84tl	, Teresa W. h Street N.W. on, FL 34209		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZP			□ Delete	B	· I					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZP	, .		☐ Delete	H	ļ					] Change	☐ Addition
Indicated of the cor	on this report poration or th	t or supplemental report is i e receiver or trustee empor	rue and accurate and that m	y signat Is reculr	ure shall ha	ave the sar	m <del>a</del> leg	9.07(3)(), Florida Statutes. I fugal effect as if made under oat a Statutes; and that my name a	h; that I am	an officer	or director