

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000107279

FILED  
Jun 14, 2005  
Secretary of State

Entity Name: BAYSIDE CONSTRUCTION & DEVELOPMENT, INC.

## Current Principal Place of Business:

1876 "E" ROAD  
LOXAHATCHEE, FL 33470 US

## New Principal Place of Business:

5475 MAULE WAY  
34  
MANGONIA PARK, FL 33407 US

## Current Mailing Address:

1876 "E" ROAD  
LOXAHATCHEE, FL 33470 US

## New Mailing Address:

5475 MAULE WAY  
34  
MANGONIA PARK, FL 33407 US

FEI Number: 06-1651618

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HELTON, MICHAEL S  
1876 "E" ROAD  
LOXAHATCHEE, FL 33470 US

## Name and Address of New Registered Agent:

HELTON, MICHAEL S  
5475 MAULE WAY  
34  
MANGONIA PARK, FL 33407 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:

06/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HELTON, MICHAEL S  
Address: 1876  
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: VTD ( ) Delete  
Name: CARTERIS, ALEXANDER P  
Address: 5089 THYME DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: SD ( ) Delete  
Name: HELTON, MICHAEL  
Address: 5089 THYME DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: HELTON, MICHAEL S  
Address: 231 GREGORY ROAD  
City-St-Zip: WEST PALM BEACH, FL 33405 US

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: MICHAEL S. HELTON

PD

06/14/2005

Electronic Signature of Signing Officer or Director

Date