

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2003 8:00 am
Secretary of State

04-11-2003 90097 049 ***150.00

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DOCUMENT # P02000107279

1. Entity Name

BAYSIDE CONSTRUCTION & DEVELOPMENT, INC.



Principal Place of Business

**5089 THYME DRIVE
PALM BEACH GARDENS FL 33418**

Mailing Address

**5089 THYME DRIVE
PALM BEACH GARDENS FL 33418**

2. Principal Place of Business

5797 Aurora Ct.

3. Mailing Address

5797 Aurora Ct.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lake Worth

City & State

Lake Worth

4. FEI Number

06-1651618

Applied For

Not Applicable

Zip

33463

Country

U.S.

Zip

33463

Country

U.S.

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145**

7. Name and Address of New Registered Agent

Name **Michael Stephen Helton**
Street Address (P.O. Box Number is Not Acceptable)
5797 Aurora Ct.
Lake Worth **FL 33463**
City Zip Code

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 **Michael Stephen Helton** President **3/15/03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **HELTON, MICHAEL S.**
STREET ADDRESS **5089 THYME DRIVE**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33418**

TITLE ☐ Change ☐ Addition
NAME **5797 Aurora Ct.**
STREET ADDRESS **Lake Worth, FL 33463**
CITY-ST-ZIP

TITLE **VTD** ☐ Delete
NAME **CARTERIS, ALEXANDER P**
STREET ADDRESS **5089 THYME DRIVE**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33418**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☐ Delete
NAME **HELTON, MICHAEL**
STREET ADDRESS **5089 THYME DRIVE**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33418**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

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: **Michael Stephen Helton** President **3/15/03** **561-596-6909**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)