## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P04000034035

BAILÉY AND ASSOCIATES, INC.



**FILED** Apr 19, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

896 HARBOR BLVD

DESTIN, FL 32541

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US

04082007

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-0770368

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

BAILEY, RONALD L SR. 1100 HWY 98 E **UNIT C703** DESTIN, FL 32541

## DO NOT WRITE IN THIS SPACE

|   | named entity submits this statement for the plants of registered agent.         | urpose of changing its                                   | registered off    | ice or r    | egistered agent, or bo         | th, in the State of Flo | rida. I am familiar with, | and accept |
|---|---|--|-------------------|-------------|--------------------------------|-------------------------|---------------------------|------------|
| SIGNATURE.  |   |  |                   |             |                                | <u></u>                 |                           |            |
|   | Signature, typed or printed name of registered agent and title                  | f applicable (NOTE                                       | : Registered Agen | t signature | required when reinstating)     |                         | DATE                      |            |
| FILE NOW!!! FEE IS \$150.00<br>After May 1, 2007 Fee will be \$550.00 |   | Election Campaign Financing     Trust Fund Contribution. |                   |             | \$5.00 May Be<br>Added to Fees |                         |                           |            |
| 10.   | OFFICERS AND DIREC  | TORS   | ·                 |             |                                |                         |                           |            |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP                                 | P D<br>BAILEY, RONALD L SR.<br>1100 U.S. HWY 98 E UNIT C703<br>DESTIN, FL 32541 |  |                   | ٠           |                                |                         |                           | ٠,         |
| IIILE<br>NAME<br>STREET ADDRESS<br>City-St-Zip                        | VP D<br>BAILEY, BRENDA L<br>1100 U.S. HWY 98 E UNIT C703<br>DESTIN, FL 32541    |  |                   |             |                                |                         |                           |            |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP                                 |   |  |                   |             |                                | NOT W                   |                           |            |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

NAME STREET ADDRESS CITY-SI-7IP

NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR