## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000092260

COX, CAMERON

200 CENTRAL AVENUE SUITE 290

ST. PETERSBURG, FL 33701

Name:

Address:

City-St-Zip:

Entity Name: BAYVIEW AUDIO VISUAL, INC.

FILED Apr 28, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5003 W. RIO VISTA AVENUE TAMPA, FL 33634 **Current Mailing Address: New Mailing Address:** 5003 W. RIO VISTA AVENUE TAMPA, FL 33634 FEI Number: 20-1255473 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: GOLDBERG, GLENN E 200 CENTRAL AVENUE SUITE 290 ST. PETERSBURG, FL 33701 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition BROWN, KRIS W Name: Name: 7028 W. WATERS AVENUE SUITE 367 Address: Address: City-St-Zip: TAMPA, FL 33634 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: BROWN, KRIS W Name: 7028 W. WATERS AVE., SUITE 367 Address: Address: TAMPA, FL 33634 US City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition GOLDBERG, GLENN E Name: Name: 200 CENTRAL AVENUE SUITE 290 Address: Address: ST. PETERSBURG, FL 33701 City-St-Zip: City-St-Zip: Title: ( ) Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

SIGNATURE: W. KRIS BROWN PRES 04/28/2008