2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000172013

1. Entity Name
PARKING LOTS BY ANDY BAILES, INC.

Principal Place of Business	Mailing Address
9171 N CO RD 229 SANDERSON, FL 32087	PO BOX 402 SANDERSON, FL 32087

DO NOT WRITE IN THIS SPACE

01262006 No Chg-P CR2E034 (11/05)

4. FEI Number
52-2448351

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MALONEY, FRANK E JR
445 E. MACCLENNY AVENUE
MACCLENNY, FL 32063

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BAILES, ANDY
STREET ADDRESS	P.O. BOX 402
CITY-ST-ZIP	SANDERSON, FL 32087
TITLE	
NAME	
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CITY-ST-ZIP	

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05/18/06-80062-010 150.00

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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William Andrew Bailes 4/28/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #