2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000028542

Entity Name: BAY AREA CARTS, INC.

FILED Sep 05, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

206 STATE ROAD 60 PLANT CITY, FL 33567

Current Mailing Address: New Mailing Address:

2909 PINE CLUB DRIVE 3 LEFE COURT

PLANT CITY, FL 33566 HAINES CITY, FL 33844

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ODOM, TERRY L MCCARTY, ROBERT L 206 STATE ROAD 60 3 LEFE COURT

US HAINES CITY, FL 33844 US PLANT CITY, FL 33567

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: ROBERT T. MCCARTY 09/05/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ODOM, JOHNNY YOUNG-MCCARTY, M. LINDA Name:

Name: 2917 FOREST CLUB DRIVE 3 LEFE COURT Address: Address:

City-St-Zip: PLANT CITY, FL 33566 City-St-Zip: HAINES CITY, FL 33844

Title: Title: () Delete (X) Change () Addition ODOM, TERRY L Name: Name: MCCARTY, ROBERT

3 LEFE COURT 2917 FOREST CLUB DRIVE Address: Address: PLANT CITY, FL 33566 HAINES CITY, FL 33844 City-St-Zip: City-St-Zip:

(X) Delete Title: Title:

() Change () Addition DRUMMOND, KENNETH M Name: Name: 2909 PINE CLUB DRIVE Address: Address:

City-St-Zip: PLANT CITY, FL 33566 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

DRUMMOND, ELIZABETH F Name: Name: Address: 2909 PINE CLUB DRIVE Address: PLANT CITY, FL 33566 City-St-Zip: City-St-Zip:

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

SIGNATURE: ROBERT T. MCCARTY D 09/05/2006