2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 21, 2006 8:00 am Secretary of State

ANNOAL ILLI OILI								5 Secretary of State				
DOCUMENT # P05000153391 1. Entity Name BAYVIEW PRESSURE CLEANING & PAINTING, INC.								04-21-2006	_			
Principal Place of Business N				Mailing Address]				
2350 ARMOUR DR				2350 ARMOUR DR								
DUNEDIN, FL 34698				DUNEDIN, FL 34698								
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							•					
2. Principal Place of Business 3.			3.	J. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.			03132006	Chg-P	CR2E	034 (11/05)		
City & State				City & State				4. FEI Numbe			L-1	plied For
								40-3	190965	2		t Applicable
Zip	Zip Country			Zip		Country		5. Certificate	of Status Desired		\$8.75 Add	
	6. Name an	d Address of Cur	tered Agent			7. Name and	Address of New F	tealstere				
6. Name and Address of Current Registered Agent						Name						
SLIGER, JERRY C												
2350 ARMOUR DR						Street Ad	iaress (P.O. Box Numbe	er is Not Acceptable	3)		
DUNEDIN, FL 34698												
						City FL Zlp Code						9
8. The above named entity submits this statement for the purpose of changing its registered office or registere									h, in the State of Fl	orida. I ar	n familiar with,	and accept
the obligations of registered agent.												
OLO MATHERS												
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required								when renstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00								.00 May Be led to Fees				
After Ma	ay 1, 2006 F	ee will be \$5	50.00	ridat runo con	IIDGUOII.		Add	00 10 1 003				
10.		OFFICERS	AND DIREC	CTORS	11.			ADDITIONS/	CHANGES TO OFF	ICERS AN	ID DIRECTORS	S IN 11
TITLE	P			☐ Delete		TITLE					☐ Change	Addition
NAME	SLIGER, JERRY C					NAME						
STREET ADDRESS						STREET ADDRESS						
CITY-ST-ZIP	DUNEDIN, FL 34698					CHTY-ST-ZIP						
TITLE	ST SUCER IERRY C			DUIDIO		TITLE					Change	Addition
NAME	SLIGER, JERRY C					JAME STREET ADDRESS						
STREET ADORESS	1			i i		TY-ST-ZIP						
	DONEDIN, 1	L 54000		☐ Delete	TIT						☐ Change	Addition
TITLE NAME				L.J Delete	NAA						C) cuanda	L) AGGIRON
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CITY-ST-ZIP						Y-ST-ZIP						
TITLE	 			Delete	חזו	_E					Change	Addition
NAME				La socia	NAA	L						
STREET ADDRESS					STR	LEET ADORESS						
CITY-ST-ZIP					cm	Y-ST-ZIP						
TITLE			Delete TITL		LE					Change	Addition	
NAME					NAA	- 1						
STREET ADDRESS						LEET ADDRESS						
CITY-ST-ZIP					cit	Y-ST-ZIP						

12. I hereby certify that the information supplied with this filling 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.

STREET ADDRESS CITY-ST-ZIP

TITLE NAME

SIGNATURE:

TETLE

NAME STREET ADDRESS

CITY-ST-ZIP

THE C-SLIGN JERRY C. SLIGER SHATTER OF PRINTED JAME OF SIGNING OFFICER OR DIRECTOR

Delete

4-16-06

127-421-9240 Daytme Phone #

Change ...

Addition