

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000110794

Entity Name: BAY BRICK PAVERS, INC.

FILED
Jan 06, 2008
Secretary of State

Current Principal Place of Business:

4141 BAYSHORE BLVD., UNIT 603
TAMPA, FL 33611

New Principal Place of Business:

9908 E. US HWY 92
TAMPA, FL 33610

Current Mailing Address:

4141 BAYSHORE BLVD., UNIT 603
TAMPA, FL 33611

New Mailing Address:

9908 E. US HWY 92
TAMPA, FL 33610

FEI Number: 20-5403092

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, MICHAEL F
4141 BAYSHORE BLVD., UNIT 603
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: WILSON, KAREN L
Address: 4141 BAYSHORE BLVD., UNIT 603
City-St-Zip: TAMPA, FL 33611

Title: TS () Delete
Name: WILSON, MICHAEL F
Address: 4141 BAYSHORE BLVD., UNIT 603
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: MICHAEL F. WILSON

TS

01/06/2008

Electronic Signature of Signing Officer or Director

_____ Date