## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000077557

Entity Name: BAYCO INSURANCE, INC.

FILED Jan 15, 2009 Secretary of State

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

201 DUXBURY AVE 395 COMMERCIAL COURT SUITE C

PORT CHARLOTTE, FL 33952 US VENICE, FL 34292 US

Current Mailing Address: New Mailing Address:

201 DUXBURY AVE 395 COMMERCIAL COURT SUITE C

PORT CHARLOTTE, FL 33952 US VENICE, FL 34292 US

FEI Number: 02-0811154 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:

BAY, WILLIAM BAY, WILLIAM F
201 DUXBURY AVE 8481 SAN PABLO AVE.

PORT CHARLOTTE, FL 33952 US NORTH PORT, FL 34287 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: WILLIAM F BAY 01/15/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D ( ) Delete Title: PRES (X) Change ( ) Addition

Name:BAY, WILLIAMName:BAY, WILLIAMAddress:201 DUXBURY AVEAddress:8481 SAN PABLO AVE.

City-St-Zip: PORT CHARLOTTE, FL 33952 US City-St-Zip: NORTH PORT, FL 34287 US

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: WILLIAM F BAY PRES 01/15/2009

Electronic Signature of Signing Officer or Director

Date