

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

04-04-2008 90027 033 ***150.00
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1st MOORE CR2E034 (10/07)

DOCUMENT # P07000079113 1. Entity Name BAY DESIGNE INC.					
Principal Place of Business 132 HERITAGE CIRCLE PANAMA CITY BEACH FL 32407 US			Mailing Address PO BOX 9174 PANAMA CITY BEACH FL 32417		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 26-0513359	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent THE LAW OFFICES OF NICK SPRADLIN, PLLC 4001 WEST HENRY AVENUE SUITE 306 TAMPA FL 33614			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 date of application. (NOTE: Registered Agent signature required when completing)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR ERBEN, MARCELA 132 HERITAGE CIRCLE PANAMA CITY BEACH FL 32407		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES ERBEN, MARCELA 132 HERITAGE CIRCLE PANAMA CITY BEACH FL 32407		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC ERBEN, MARCELA 132 HERITAGE CIRCLE PANAMA CITY BEACH FL 32407		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA ERBEN, MARCELA 132 HERITAGE CIRCLE PANAMA CITY BEACH FL 32407		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.					
SIGNATURE: <u>Marcela Erben</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: <u>03/08/08</u>		

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