

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000069822

FILED
Mar 30, 2009
Secretary of State

Entity Name: BAKER COUNTY PROPERTIES, INC.

Current Principal Place of Business:

2 EAST MACCLENNEY AVENUE
MACCLENNEY, FL 32063 US

New Principal Place of Business:

Current Mailing Address:

2 EAST MACCLENNEY AVENUE
MACCLENNEY, FL 32063

New Mailing Address:

FEI Number: 59-3209301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALONEY, FRANK E JR.
2 EAST MACCLENNEY AVENUE
MACCLENNEY, FL 32063 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: SMALLWOOD, LA VIECE
Address: 6793 SANDADALE RD
City-St-Zip: MACCLENNEY, FL 32063

Title: T () Delete
Name: BRADLEY, PEARL L
Address: 10554 HILLSIDE DRIVE
City-St-Zip: MACCLENNEY, FL 32063

Title: S () Delete
Name: GORE, PAULINE A
Address: 1128 COPPERGATE PL
City-St-Zip: MACCLENNEY, FL 32063

Title: VP () Delete
Name: BRADLEY, PEARL
Address: 10544 HILLSIDE DRIVE
City-St-Zip: MACCLENNEY, FL 32063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: GORE, POLLY C
Address: 1128 COPPERGATE PL
City-St-Zip: MACCLENNEY, FL 32063

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: POLLY GORE

SEC

03/30/2009

Electronic Signature of Signing Officer or Director

_____ Date