## **2002 UNIFORM BUSINESS REPORT (UBR)**

**SIGNATURE:** 

DOCUMENT # P9400020464  1. Entity Name BAILEY HOLDINGS, INC.				;	Secretary of State 02-01-2002 90041 042 ***150.00			
	ce of Business	Mailing Address						
5834 NW 26 BOCA RATON		5834 NW 26 COURT BOCA RATON FL 33496						
		3. Mailing Address						
2. Principal I	Place of Business Thatch Palm Dr.	Palm Dr						
Suite, Apt		Suite, Apt. #, etc.			DO NOT WRITE IN	THIS SPACE		
City & Sta	ca Raton, FL	City & State Raton	, FL	4.	FEI Number <b>65-0474065</b>	———·	pplied For ot Applicable	
<sup>Zip</sup> 33시3	2 Country U.S.A.	<sup>Zip</sup> 33432	Country U.S. A.	5.	Certificate of Status Desired	\$8.75 Add		
	6. Name and Address of Current I			7.	Name and Address of New Regis	tered Agent		
OT 0000	ODATION OVOTER	•	Name		-			
	ORATION SYSTEM JTH PINE ISLAND ROAD	Street Address (P.O. Box Number is Not Acceptable)						
PLANTATION FL					**************************************	<del> </del>	-	
			City			FL Zip Cod	le	
8. The above	named entity submits this statement for	the purpose of changing its reg	istered office or	registered ag	gent, or both, in the State of Florida.			
Tax filing	Signature, typed or printed name of registered agent a cration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!!! After May 1, 2002 Make Check Payable	Fee will be \$5	00 550.00	10. Election Campaign Financir Trust Fund Contribution.	~ _ <del>~</del>	00 May Be	
11.	OFFICERS AND D	DIRECTORS	12.	Αſ	ODITIONS/CHANGES TO OFFICER	S AND DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCNALLY, JOHN 5834 NW 26 COURT BOCA RATON FL 33496	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	McNall 1600 Tr Boca R	Natch Palm Dr. Raton FL 33432	<b>√</b> Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCNALLY, ARLINE 5834 NW 26 COURT BOCA RATON FL 33496	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MªNall 1600 TI Boca	Arlige Natch Palm Dr. Rat, FL 33432	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	
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	
indicated	certify that the information supplied with to on this report or supplemental report is to poration or the receiver or trustee empoy	rue and accurate and that my s	exemption stati	ive the same	legal effect as if made under gath: f	that I am an officer.	or director 1	