

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000029027 (7)

1. Corporation Name
BAY COMMUNICATIONS, INC.

Principal Place of Business

104 EMOGENE PL
MOBILE AL 36606

Mailing Address

104 EMOGENE PL
MOBILE AL 36606-4807

2. Principal Place of Business

21 15 W. Strong St.

Suite, Apt. #, etc.

22 Suite 21-B

City & State

23 Pensacola, Fl.

Zip

Country

24 32501

25 Escambia

2a. Mailing Address

26 15 W. Strong St.

Suite, Apt. #, etc.

27 Suite 21-B

City & State

28 Pensacola, Fl.

Zip

Country

29 32501

30 Escambia

9. Name and Address of Current Registered Agent

DANIEL, WILLIAM D
15 W STRONG ST 21B
PENSACOLA FL 32501

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

04/15/1994

3a. Date of Last Report

04/19/1996

4. FEI Number

59-3240212

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DANIEL, WILLIAM D
STREET ADDRESS 104 EMOGENE PL
CITY-ST-ZIP MOBILE AL 36606

TITLE ☐ DELETE

NAME DANIEL, REBECCA Y
STREET ADDRESS 104 EMOGENE PL
CITY-ST-ZIP MOBILE AL 36606

TITLE ☐ DELETE

NAME YOUNGBLOOD, NEWTON C
STREET ADDRESS 5305 MUSKET RIDGE
CITY-ST-ZIP AUSTIN TX 78759

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Daniel Daniel

4-28-97 (904)432-6200

FILED
May 07 1997 8:00am
Secretary of State



CR2E034 (9/96)