## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



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

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		70400004		

STREET ADDRESS

C(T) - S1 - 7(P)

DOCUMENT # P94000031034 (9) 1. Corporation Name

BAYNARD MANAGEMENT, INC.  Principal Place of Business Mailing Address  1801 BRIGHTWATER BLVD NE 1801 BRIGHTWATER BLVD NE ST PETERSBURG FL 33704 ST PETERSBURG FL 33704					
US	ONG FL 33/04	ST PETERSBURG FL : US	33704		
				3. Date Incorporated or Qualified	
				04/25/1994	05/01/1995
F	Place of Business	2a. Mailing Address		4, FEt Number 59-3239855	Applied For
Suite, Apt.	+ Alo	26		08-0208000	Not Applicable
22	. H, BIC.	27 Suite, Apr. #, etc.		<ol><li>Certificate of Status Desired</li></ol>	\$8.75 Additional Fee Required
City & Stat	: : : : : : : : : : : : : : : : :	City & State		6. Election Campaign Financing	
23		28		Trust Fund Contribution	S5.00 May Be Added to Fees
Zip	Country	Zip	Country	B. This corporation has liability for	<del></del>
24	25	29	30		s □No
	<ol><li>Name and Address of Cur</li></ol>	rent Registered Agent		10. Name and Address of New	Registered Agent
			81 Name	and Brew	( A
-MCINTY	RE, ROBERT L.		82 Street Add	ress (P.O. Box Number is Not Accepta	bie
4320 8T	HSTS -		1801	BRIGHTWATE	RS BLVO NE
ST-PETE	e <del>rsburg pl-397</del> 05		83		
			84 City	,	85 Zip Code
			-518-	reasbung.	FL   2370 U
11. Pursuant	to the provisions of Sections 607.0	502 and 607 1508, Florida Statu Iorida, Suck quance was author	ites, the above named corporation's boa	ration submits this statement for the pured of directors. I hereby accept the appropriate the property of the	urpose of changing its registered office
familiar w	vith, and see the obligations of, S	egio 60, 8505, Florida Statute	es.	P P	rpose of changing its registered office pointment as registered agent. I am
SIGNATURE	1786land	- Luma	LOWARD	LIBAYNIARD	2.26.96
	Septements of printed name of registered a		NOTE. Begistered Agent signature require	d when reinstating)	D-11C
12.	P	AND DIRECTORS	13. 1.1 THLE	ADDITIONS/CHANGES TO UF	FICERS AND DIRECTORS IN 12  Change Addition
NAME	BAYNARD, PATRICIA C		1.2 NAME		Change Addition
STREET ADDRESS	1801 BRIGHTWATER BLVD	NE	1.3 STREET ADDRESS		
C(TY+S1+Z)(2	ST PETERSBURG FL	INC	1		
TIFLE	V	☐ DELETE	1.4 CITY - ST - ZIP 2 1 TITLE		Change Addition
NAME	BAYNARD, EDWARD L	LJ	2.2 NAME		
STREET ADDRESS	1801 BRIGHTWATER BLVD	NF	2.3 STREET ADDRESS		
CHY-SI-ZIP	ST PETERSBURG FL		2.4 CITY-ST-ZIP		
THE	· · · · · · · · · · · · · · · · · · ·	DELETE	3. 1 TITLE		Change Addition
NAME			3.2 NAME		<del></del>
STHEET ADDRESS			3.3 STREET ADDRESS		
CITY - ST- ZIP			3.4 CITY - ST - ZIP		
1000		☐ DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST- ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5 1 TIBLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
C(TY+S'+7)P			54 CITY-ST-ZIP		
TIFLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			6 2 NAME		

813-821-5690 Devine Prone 2-26-96 Cate SIGNATURE (

6 3 STREET ADDRESS

6.4 CITY-S1-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 to changed, or on an altachment with 40 address.