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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 27 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1. Corporatio	Y BY THE BAY, INC.	10039067 (1)				
Principal Place of Business Mailing Address					1 10011001 114 15114 S. CALL SOUL SEALS SEALS	Bhinh teite ibre daten Artte afft afte.
2810 D HIGHWAY 77 2810 D HIGHWAY 77						
PANAMA CITY FL 32405 US		PANAMA CITY FL 32405 US			DO NOT WRITE IN THIS SPACE	
"		V 0			3. Date Incorporated or Qualified	
]					05/24/1994	
2. Principal P	Place of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3243713	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27				Fee Required
City & State		City & State 28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	/	8. This corporation owes or has paid	
24	25	29	30		Personal Property Tax due June 30	
	9. Name and Address of Curre	m Negistered Agent	81	Name	10. Name and Address of New Regis	stered Agent
	DHINSON, BARBARA S					
6420 PINE TREE TRAIL PANAMA CITY FL 32404			82 Street Add		dress (P.O. Box Number is Not Acceptable))
"	HANNIN CITT FL 32404		83	-		<u> </u>
			84	City		FL 85 Zip Code
11. Pursuant office or ragent. I a	to the provisions of Sections 607.05 registered agont, or both, in the Statem familiar with, and accept the oblig	02 and 607.1508, Florida Statut e of Florida. Such change was a gations of, Section 607.0505, Flo	es, the above authorized by orida Statute	e-named cory y the corpora s.	rporation submits this statement for the pur ation's board of directors. I hereby accept t	pose of changing its registered the appointment as registered
SIGNATURE						
12.	Signature, typod or printed name of registered agent and title if applicable (NOT OFFICERS AND DIRECTORS		E: Registered Age	ent signature rege	uirod when reinstating) ADDITIONS/CHANGES TO OFFICER	DATE RS AND DIRECTORS IN 12
TITLE	DELETE		1.1 TITLE		ADDITIONS/OFFANGES TO OFFICE	Change Addition
NAME	JOHNSON, BARBARA S	OHNSON, BARBARA S				
STREET ADDRESS	6420 PINE TREE TRAIL		1.3 STREET ADDRESS			
CITY-ST-ZIP	PANAMA CITY FL		1.4 CITY-S			
TITLE	DELETE		2.1 TITLE			Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET	ADDRESS		
CITY-ST-ZIP			2.4 CITY-	ST-ZIP		
TITLE		DELETE	TE 3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET			
CITY-ST-ZIP	T DELETE		3.4. CITY - ST - ZIP			Change Addition
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET			
CITY-ST-ZIP TITLE	DELETE		4.4 CITY-ST-ZIP 5.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			5.1 THEE			C 2000 C MORROLL
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - S	1		
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
CTOCET ADODECC			6 2 CTOCET	YUDDECC		

14. I 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 suppliemental 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 flustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an intlachment with an address.

4 holar