

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000065924 (0)

1. Corporation Name

BAY LEASING COMPANY, INC.



Principal Place of Business

Mailing Address

5537 SHELDON RD
SUITE D
TAMPA FL 33615

5537 SHELDON RD
SUITE D
TAMPA FL 33615

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

YOUNG, RONALD A
5537 SHELDON RD
SUITE D
TAMPA FL 33615

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

RONALD A. YOUNG, PRESIDENT 1/16/96

Signature of person authorized to act as registered agent (if not applicable)

Signature of Registered Agent (signature required when first filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CSD	☐ DELETE
NAME	NERNBERG, A R	
STREET ADDRESS	5541 WALNUT ST	
CITY-STATE-ZIP	PITTSBURG PA 15232	
TITLE	PD	☐ DELETE
NAME	MALASKY, DONALD C	
STREET ADDRESS	1300 N FLORIDA MANGO RD #15	
CITY-STATE-ZIP	WEST PALM BEACH FL 33409	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

1. TITLE	CD	☒ Change ☐ Addition
2. NAME		
3. STREET ADDRESS		
4. CITY-STATE-ZIP		
1. TITLE	D	☒ Change ☐ Addition
2. NAME	MALASKY, DONALD C.	
3. STREET ADDRESS	(SAME)	
4. CITY-STATE-ZIP		
1. TITLE	PD	☐ Change ☒ Addition
2. NAME	RONALD A. YOUNG	
3. STREET ADDRESS	5537 SHELDON RD, STE D	
4. CITY-STATE-ZIP	TAMPA, FL 33615	
1. TITLE	AVP	☐ Change ☒ Addition
2. NAME	DANA S.J. STANLEY	
3. STREET ADDRESS	5537 SHELDON RD, STE D	
4. CITY-STATE-ZIP	TAMPA, FL 33615	
1. TITLE	S	☐ Change ☒ Addition
2. NAME	BRENDA SOWRY	
3. STREET ADDRESS	5537 SHELDON RD, STE D	
4. CITY-STATE-ZIP	TAMPA, FL 33615	
1. TITLE		☐ Change ☐ Addition
2. NAME		
3. STREET ADDRESS		
4. CITY-STATE-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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
RONALD A. YOUNG, PRESIDENT

1/16/96 (813)886-5626
Date Date/Time Phone #
EXT 116

CR2E034 (12/95)