

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 21, 2003 8:00 am
Secretary of State

07-21-2003 90130 003 ***550.00

0030497 AV

DOCUMENT # P94000073398

1. Entity Name
PORKY'S BAYSIDE, INC.



Principal Place of Business
**1400 OVERSEAS HWY.
MARATHON FL 33050**

Mailing Address
~~1400 OVERSEAS HWY.~~ **1410 Overseas Hwy,**
MARATHON FL 33050



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0531063**

Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~NEUGENT, GEORGE R
1474 OVERSEAS HIGHWAY
MARATHON, FL 33050~~

**John Maddox
1410 Overseas Hwy
Marathon, FL
33050**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *John Maddox*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|------------------------------|--|
| TITLE | D | <input checked="" type="checkbox"/> Delete |
| NAME | NEUGENT, GEORGE | |
| STREET ADDRESS | 1474 OVERSEAS HWY. | |
| CITY-ST-ZIP | MARATHON FL 33050 | |
| TITLE | D | <input checked="" type="checkbox"/> Delete |
| NAME | NEUGENT, SUSAN | |
| STREET ADDRESS | 1474 OVERSEAS HIGHWAY | |
| CITY-ST-ZIP | MARATHON FL 33050 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

| | | |
|----------------|----------------------------|--|
| TITLE | President | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | John Maddox | |
| STREET ADDRESS | 1410 Overseas Hwy | |
| CITY-ST-ZIP | Marathon, FL 33050 | |
| TITLE | Secretary/Treasurer | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Barbara Maddox | |
| STREET ADDRESS | 1410 Overseas Hwy. | |
| CITY-ST-ZIP | Marathon, FL 33050 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Barbara Maddox* **Barbara Maddox** 7/16/03 305-481-3258

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CF2E034 (4/03)