

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

CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State

1995 5-29-95 6-6969 LFC OF C/O/AT/0/0/5

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

SEAL MAY 20 11 08

DOCUMENT # P94000081818 (4)

1. Corporation Name
BAYSERV CORPORATION

Principal Place of Business Mailing Address
**400 MOUNTAIN DRIVE PO BOX 5355
B-1 DESTIN FL 32541 DESTIN FL 32540**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/07/1994
3a. Date of Last Report

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

4. FEI Number 59-3278158 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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MYERS, J. PAUL JR
400 MOUNTAIN DRIVE
B-1
DESTIN FL 32541**

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 607.1508, 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 resigning

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME MYERS, J. PAUL JR
STREET ADDRESS 50 W BRADLEY ST #8
CITY - ST - ZIP DESTIN FL 32541
TITLE D
NAME MYERS, AMELIA E JR
STREET ADDRESS 50 W BRADLEY ST #8
CITY - ST - ZIP DESTIN FL 32541
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

1 1 TITLE D, P, C Change Addition
1 2 NAME Myers, J. Paul Jr
1 3 STREET ADDRESS 50 W. Bradley St. #8
1 4 CITY - ST - ZIP Destin, FL 32541
2 1 TITLE D, T, S Change Addition
2 2 NAME Myers, Amelia E.
2 3 STREET ADDRESS 50 W. Bradley St. #8
2 4 CITY - ST - ZIP Destin, FL 32541
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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 affidavit.

SIGNATURE: Amelia E. Myers - Amelia E. Myers 5-23-95 654-8552
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Include Title)