FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90071 027 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000002263

1. Corporation Name

BAYMEADOWS DEVELOPMENT COMPANY, INC.							
Principal Place of Business Mailing Address							
1688 W HIBISCI	IIS BLVD	1688 W HIBISCUS BLVD					
MELBOURNE FL 32901 MELBOURNE FL 32901							
US US			•			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed	
						01/04/1995	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For	
21	<u> </u>	26				59-3291652   Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<b>—</b>			5. Certificate of Status Desired See Required	
City & State	e	City & State	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Cou	ntry		This corporation owes the current year Intangible	
24	25	29	30			Personal Property Tax.	
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Registered Agent	
				81	Name		
EVANS, ARTHUR F III			ł	82 Street Address (P.O. Box Number is Not Acceptable)			
1688 W HIBISCUS BLVD			-	02 Street Address (1.0. Dox Humber to Het Heespitable)			
MELI	BOURNE FL 32901		[	83			
ſ			-	84	City	85 Zip Code	
				04	City	FL   S   S   S   S   S   S   S   S   S	
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	Signature, typed or printed name of registered age	int and title if applicable. (NOTE:	Registered	Agent	t signature re	required when reinstating) DATE	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1,1 TIT	LE.		☐ Change ☐ Addition	
NAME	evans, arthur f III		1.2 NA	ME			
STREET ADDRESS	1688 W HIBISCUS BLVD		1,3 STREET		ADDRESS		
CITY-ST-ZIP	MELBOURNE FL		1.4 CITY-S		r-ZIP		
TITLE	Ð	☐ DELETE	2.1 TITLE		J	SECRETARY / TREAS. Thange Addition	
NAME	evans, hugh M Jr		2.2 NA	ME		•	
STREET ADDRESS.	1688 W HIBISCUS BLVD		2.3 STREET /		ADDRESS		
CITY-ST-ZIP	MELBOURNE FL		2.4 CITY-S		T-ZIP		
TITLE	₩- · /.	DELETE	3,1 TITLE			☐ Change ☐ Addition	
NAME	PENCE, HERSCHEL		3.2 NA	ME	l		
STREET ADDRESS	3115 DIXIE HWY		3.3 \$T	REET	ADDRESS		
CITY-ST-ZIP	PALM BAY FL		3.4. CI	TY-S	T-ZIP		
TITLE	ST VP	☐ DELETE	4.1 TIT	n.E		VICE PRESIDENT Grange Addition	
NAME	PENCE, ROY		4. 2 N	AME			
STREET ADDRESS	3115 DIXIE HIGHWAY		4.3 ST	REET	ADDRESS		
CITY-ST-ZIP	PALM BAY FL		4.4 CITY-ST		r-ZIP		
TITLE		☐ DELETE	5.1 111	TLE	1	☐ Change ☐ Addition	
NAME			5.2 NA	ME	1		
STREET ADDRESS			5.3 ST	REET	ADDRESS	3	
CITY-ST-ZIP			5.4 CIT	TY-\$T	r-ZiP		
TITLE		. DELETE	6.1 TIT	ΓLE		☐ Change ☐ Addition	
		•	CZNIA	ME			

CITY-ST-ZIP 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 supplimental 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 on 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS