

2002 UNIFORM BUSINESS REPORT (UBR)

4/1/

FILED
May 01, 2002 8:00 am
Secretary of State

04-01-2002 90169 011 ***158.75

DOCUMENT # P95000007305

1. Entity Name

BARON CAPITAL IV, INC.

Principal Place of Business

**7828 COOPER ROAD
 CINCINNATI OH 45242
 US**

Mailing Address

**7828 COOPER ROAD
 CINCINNATI OH 45242
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Grove at Lakeland Square
 Suite, Apt. #, etc.
3570 U.S. Hwy 98 N.
 City & State
Lakeland Florida
 Zip
33809
 Country
U.S.A.

3. Mailing Address
Grove at Lakeland Square
 Suite, Apt. #, etc.
3570 U.S. Hwy 98 N.
 City & State
Lakeland Florida
 Zip
33809
 Country
U.S.A.

4. FEI Number **65-0570122** Applied For
 Not Applicable
 5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MCGRATH, GREGORY K
 4981 GULF OF MEXICO DRIVE
 #107
 LONGBOAT KEY FL 34228**

7. Name and Address of New Registered Agent

Barcap Realty Services Group, Inc.
 Street Address (P.O. Box Number is Not Acceptable)
Grove at Lakeland Square
3570 U.S. Hwy 98 N.
 City
Lakeland **FL** **33809**

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.

SIGNATURE **Mark L. Wilson, VP** **Mark L. Wilson, VP** **3/15/02**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
	P	MCGRATH, GREGORY	7828 COOPER ROAD	<input checked="" type="checkbox"/>
		CINCINNATI OH		
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
	P	Robert Astorino	3570 U.S. Hwy 98 N.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
		Lakeland, Florida	33809		
		Vice President		<input type="checkbox"/>	<input checked="" type="checkbox"/>
		Mark L. Wilson	3570 U.S. Hwy 98 N.		
		Lakeland, FL	33809		
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Mark L. Wilson, VP** **Mark L. Wilson, VP** **3/15/02** **513 936 3408**
 Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/01)