FILE NOW: FILING FEE AFTER MAY 1 187\$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham, . . *

Secretary of State

DIVISION OF CORPORATIONS

1996

P95000022927 (4) DOCUMENT #
1. Corporation Name

| BARO | N CAPITAL VI, INC. | | | |
|--|--|---|----------------------------------|---|
| Principal Place | of Business | Maling Address | |) imiliate lie titin: Ellis Allis Bater Cater Bater ante inden mare enten erne sent |
| 28050 U.S. 1 SUITE 301 CLEARWATE | | 29050 U.S. 19 NORTH SUITE 301 CLEARWATER FL 34621 | | Date Incorporated or Qualified |
| | | , | _ | 03/21/1995 |
| 2. Principal Pl | negul Business 15 COPC/RO v. etc. | 2a. Maulus Act 5 ss 26 Surte, Apt #, etc. | roperRoc | 4. FEI Number 59 - 3305416 Settificate of Status Desired Applicable Not Applicable \$8.75 Additional |
| 22 | <u> </u> | 27 | | Fee Required |
| 973 Stay | nimati oh | Aty & State | ate the | 6. Election Campaign Financing \$5.00 May Be |
| 23 1/1 | A / / / Gountry | 28/1/////// | Country | Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, |
| 24 450 | 242 135 CAILLY | 29 75242 | 100 kily | Florida Statutes Ses No |
| | g. Name and Address of Curren | | | 10. Name and Address of New Registered Agent |
| | | | 81 Name | |
| MCGRATH, GREGORY K 82 Street Addre | | | | ess (P.O. Box Number is Not Acceptable) |
| 28050 U.S. 19 NORTH | | | ļ., | |
| · SUITE | | | 83 | |
| CLEAR | WATER FL 34615 | | 84 City | 85 Zip Code |
| 44 Pursuport | to the expulsions of Sections EO2 0502 | and 607 1508 Florida Statutos | the above-named cornor | ration submits this statement for the purpose of changing its registered office |
| or register | red agent, or both, in the State of Florid | da. Such change was authorized. | by the corporation's boar | rd of directors. Thereby accept the appointment as registered agent. Fam |
| | th, and accept the obligations of, Secti | ion 607.0505, Florida Statutes. | | |
| SIGNATURE . | Signature type comprised cance of registers it type to | and the mapping of the definition of the de- | Bigohead Ageod sababak haqeese | d When retro fat ag |
| 12. | OFFICERS AN: | | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | Frestaunt v | DOGFTE - | 1 1 1 ITLE | Change Addition |
| NAME | Gregory | 10 Graffy | 1.2 NAME | |
| STREET ADDRESS | 7795 COOPE | 1 Shayerd | 1.3 STREET ADDRESS | |
| CITY - ST - ZIF | CINCINIXIT | DELETE | 1.4 CiTY - ST- Zif: 2.1 Tift! | Change Addition |
| TITLE | | been | 22 NAME | |
| NAME CIRCLI IDDOCSE | | | 2 3 STREET ADDRESS | |
| STREET ADDRESS CITY-ST-ZIP | | | 24 CiTY - S' 7 IP | |
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| STREET ADDRESS | | | 3.3 STREET ADDRESS | |
| City+St-ZiP | | | 3.4 C(T) - ST-Z(P | |
| TITLE | | □ DELETE | 4 1 THLE | SOCOTI 73 54 Crange C Addition |
| NAME | | | 4.2 NAME | 03/25/96-01009-014 ***1400.00 |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | ***1400.00 |
| CHY-S1-ZIP | | T nei ere | 44 CiTY - S! ZP | Change Addition |
| TITLE | | DECETE | 5 1 HitE | Change Addition |
| NAME CARGOT ADDROGGO | | | 5.2 NAME 5.3 STREET ADDRESS | Change Addition |
| STREET ADDRESS | | | 5.4 City - St - ZiP | 1-1-90 |
| CITY-ST-ZIP TITLE | | DELETE | 6 1 TIFLE | □ Change □ Addition |
| NAME | | <u> </u> | 6.2 NAME | |
| STREET ADDRESS | | | € 3 STREET ADDRESS | (112 |
| City - ST - ZIP | | | 64 C/TY ST - Z/P | 5 |
| | 1 | | | |

14. Too 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 Glock 13 if changed, or up any trachment with an address.

SIGNATURE? ITED NAME OF SIGNING OFFICER OR DIRECTOR