


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P95000037188

1. Entity Name
BAY SCREENS, INC.



Principal Place of Business
**1310 WILLOW VALLEY DR.
 BRANDON, FL 33510**

Mailing Address
**1310 WILLOW VALLEY DR.
 BRANDON, FL 33510**

DO NOT WRITE IN THIS SPACE



01202008 No Chg-P CRZE034 (11/05)

4. FEI Number
59-3324849

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**FRYE, RANDY
 1310 WILLOW VALLEY DR
 BRANDON, FL 33510**

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

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

00000522015
 05/03/06-80011-021 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO FRYE, RANDY 1310 WILLOW VALLEY DR. BRANDON, FL 33510
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD FRYE, MADINE 1310 WILLOW VALLEY DR. BRANDON, FL 33510
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Nadine Frye Nadine Frye 4-17-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #