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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000070123 (1) 1. Corporation Name

BAY & BAYOU SERVICE CORPORATION

467 SECOND AVE NORTH ST. PETERSBURG FL 33701 3. Date Incorporated or Qualified 09/12/1995 2. Principal Place of Business 2. Principal Place of Business 3. Date Incorporated or Qualified 09/12/1995 4. FEI Number 5 9 - 3 3 3 / 480 Not Applied For Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State City & State Zip Country Zip Country Zip Country Zip Country A67 SECOND AVE NORTH ST. PETERSBURG FL 33701 3. Date Incorporated or Qualified 09/12/1995 4. FEI Number 5 9 - 3 3 3 / 480 Not Applied For Not Applicable Stuite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Fee Required Fee Required Added to Fees Added to Fees Added to Fees Zip Country Zip Country Zip Country Zip Country 8. This corporation has liability for intangible tax under s 199.032.	J. II a J. II o o o o o o o o o o o o o o o o o o									
3. Detail Processor FL 33701 3. Detail of Last Report 3. Detail of La	Principal Place	of Business	Mailing Address					8 8551 8 9 110 18 841 8 8481 118	ID HOUR HIGH HARI	
2. Principal Place of Business 2. Minking Address 3. The Nings 5. Gent Can state 2. Sure, Act. state 2. Su										
Series April 6, etc. Series April 6, etc. Series Series April 6, etc. Series							09/12/1995	3a. Date of Last	Report	
27	21 1 301	1 1 301/2 Snell Blud 26					4. FEI Number 5-9-3331480			e
22 S. 7 S.	22 27						5. Certificate of Status Desired			
23 3.70-4 28	23 GT. P	etersburg FL	28				, ,	1 1		
WALLER, JOHN L			29	<u></u>	intry	<u></u>	Fiorida Statutes Yes	⊠ No	199.032.	
STRET ADDRESS OP - ST. PETERSBURG FL 33701 82 Street ADDRESS (F. O. Box North ST. PETERSBURG FL 33701) 84 City FL 85 Zip Code FL 85 Zip Code 11. Pursuant to the provisions of Sections (607,650) and 607,1509 Florate Statutes. The advance named comparation submits this statement for the purposes of changing its registered eigent. I am registered agent, on both, in the State of Florate Statutes. The componitional as registered agent. I am registered agent. I am state agent and accept the displacion of Science 607,0509. Florate Statutes. SIGNATURE SIGNATURE DP1			Hegistered Agent		81	Name	10. Name and Address of New F	legistered Agent		
11. Pursuant to the provisions of Sections 607-0502 and 607-1509 Floride 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 Fordia Special engage was inhorated by the componation's board of dealors. Thereby accept the appointment as registered agent, it am femaliar with, and accept the obligators of Science 807-0505. Inches Statutes, the above named corporation's board of dealors. Thereby accept the appointment as registered agent, it am femaliar with a dealor of dealors. Thereby accept the appointment as registered agent, it am femaliar with a dealor of dealors. Thereby accept the appointment as registered agent, it am femalia with a dealor of dealors. Thereby accept the appointment as registered agent, it am femaliar with a dealor of dealors. Thereby accept the appointment as registered agent, it am femaliar with a dealor of dealors. Thereby accept the appointment as registered agent, it am femaliar with a dealor of dealors. Thereby accept the appointment as registered agent, it am femaliar with a dealor of dealors. Thereby accept the appointment as registered agent, it am femaliar with a dealor of dealors. Thereby accept the appointment as registered agent, it am femaliar with a dealor of dealors. Thereby accept the appointment as registered agent, it am femaliar with a dealor of dealors. Thereby accept the appointment as registered agent, it am femaliar with a dealor of dealors. Thereby accept the appointment as registered agent, it am femalia with a dealor of dealors. Thereby accept the appointment as registered agent, it am femalia with a dealor of dealors. Thereby accept the appointment as registered agent, it am femalia with a dealor of dealors. The appointment as registered agent, it am femalia with a dealor of dealors. The appointment as registered agent, it am femalia with a dealor of dealors. Thereby accept the appointment as registered agent, it am femalia with a dealor of dealors. The appoin	467 SEC	OND AVE NORTH			82	Street Add	dress (P.O. Box Number is Not Acceptab	ole)		_
11. Pursuant to the provisions of Sections 607.0502 and 607.1508 Florids Statutios, the above named corporation submits this statement for the purpose of changing its registered direct or registered agent, or both, in the State of Florids Such change was unthorzed by the corporation's been of directors. I hereby accept the appointment as registered agent. I am SIGNATURE Spring to provide the obligations of Section 607.0505, frontal Statution. SIGNATURE Spring to provide the obligation of Section 607.0505, frontal Statution and the obligation in the obligation of the obligation obligation of the obligation obl	ST, PETE	RSBURG FL 33701								
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12.	familiar with	n, and accept the obligations of, Section	a: Such change was authoriz m 607.0505, Florida Statutes	ea by the c	ve na corpor	med corpo ation's bos	oration submits this statement for the pur are of directors. Thereby accept the app	pose of changing its ointment as registere	registered offic d agent. I am	æ
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		certify that the information supplied wi	th this filma is voluntarily furn				for the exercation stated in Section 110	OZIGIAN Florida State	Vac to the	ЭK

I. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k). Florida Statutes. The 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 to oath; that I am an officer or director of the corporation or the experience or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my but appears in Block 12 or Block 13 if changed, or on an attyrity tent with an address.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 8, 1994

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