

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED

Sep 17 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P95000084879 (2)

1. Corporation Name

BAXTER TECHNOLOGIES, INC.

Principal Place of Business

930 HERON COURT  
MARCO ISLAND FL 34145  
US

Mailing Address

930 HERON COURT  
MARCO ISLAND FL 34145  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/02/1995

3a. Date of Last Report

08/05/1996

4. FEI Number

65-0658750

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 1296 MARTINIQUE CT

Suite, Apt. #, etc.

22 City & State

23 MARCO ISLAND FL

Zip

24 34145

Country

25

2a. Mailing Address

26 P O Box 711

Suite, Apt. #, etc.

27 City & State

28 MARCO ISLAND FL

Zip

29 34146

Country

30

9. Name and Address of Current Registered Agent

BAXTER, JOHN F  
930 HERON COURT  
MARCO ISLAND FL 34145

10. Name and Address of New Registered Agent

81 Name BAXTER JOHN F

82 Street Address (P.O. Box Number is Not Acceptable)

1296 MARTINIQUE CT

83

84

City MARCO ISLAND

FL

85

Zip Code 34145

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 JOHN F BAXTER

Signature typed or printed name of registered agent and title if applicable

(Not a Registered Agent Signature required when reinstating)

Aug. 1, 97

DATE

12. OFFICERS AND DIRECTORS

TITLE DTP ☐ DELETE

NAME BAXTER, JOHN F JR  
STREET ADDRESS 930 HERON CT  
CITY-ST-ZIP MARCO ISLAND FL

TITLE DV ☐ DELETE

NAME BAXTER, JOHN F JR  
STREET ADDRESS 930 HERON CT  
CITY-ST-ZIP MARCO ISLAND FL

TITLE DS ☐ DELETE

NAME ROMANO, LUISE  
STREET ADDRESS 930 HERON CT  
CITY-ST-ZIP MARCO ISLAND FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 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 Block 13 if changed, or on an attachment with an address.

SIGNATURE JOHN F BAXTER

CR2E034 (4/97)