FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000090060 (1) DOCUMENT #

BAYWAY ADVENTURES, INC.

Principal Place of Business

Mailing Address

FILED Mar 11 1998 8:00am Secretary of State



17811 GULF E	3LVD. SHORES FL 33708	17811 GU		00000		
HEDRIGION C	SHORES TE SO/OB	REDINGTON SHORES FL 33708				DO NOT WRITE IN THIS SPACE
ĺ						3. Date Incorporated or Qualified
						11/21/1995
<u></u>	ace of Business	2a. Mailing	j Address			4. FEI Number Applied For
21		26				NOT APPLICABLE Not Applicable
Suite, Apt. #, etc.		Suito, /	Suito, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State)	City &	State			6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip		Country	1	8. This corporation owes or has paid the current year Intangible
24	25	29		30		Personal Property Tax due June 30. No
	9. Name and Address of Curre	nt Registered A	gent			10. Name and Address of New Registered Agent
BIE	RLY, MAURICE R			81	Name	
17811 GULF BLVD.				82	Street	Address (P.O. Box Number is Not Acceptable)
REDINGTON SHORES FL 33708					0001	. dailoso (r. o. pox. raintos ib rect. tocopiable)
				83		, , , , , , , , , , , , , , , , , , ,
				-		
				84	City	El 85 Zip Code
11, Pursuant t	o the provisions of Sections 607.05	02 and 607.1508	, Florida Statu	ites, the abov	e-named	corporation submits this statement for the purpose of changing its registered
office or re	egistered agent, or both, in the State in temitiar with, and account the oblid	e of Florida, Suct	i change was n 607 0505 E	authorized b	y the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
	The state of the s	J		ioncia Giarate	J.	
SIGNATURE	Signature, typed or profest name of registered as	pertamo tilic if applicate	in (NO	TE Registered Ag	ent signature	prequired when reinstating) DATE
12.	OFFICERS AN	NO DIRECTORS		13.	-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTD	,	DELETE	1.1 TITLE		Change Addition
NAME	BIERLY, MAURICE R			1.2 NAME		,
STREET ADDRESS	17811 GULF BLVD			1.3 STREET	ADDRESS	
CITY-ST-ZIP	REDINGTON SHORES FL			1.4 CITY - S		
TITLE	SD .		DELETE	2.1 TITLE	<u></u>	Change Addition
NAME	BIERLE, JOANNE			2.2 NAME		BIERLY, JOHNN E.
STREET ADDRESS	17811 GULF BLVD			2.3 STREET	ADDRESS	Richard Comment
CITY-ST-ZIP	REDINGTON FL			2 4 CITY-		• • • •
TITLE	The officer of the of		DELETE	3.1 TITLE	31- ZIF	☐ Change ☐ Addition
NAME				3.2 NAME		C Olange C Nation
STREET ADDRESS				3.3 \$TREET	ADDRESS	
CITY-ST-ZIP						
TITLE			DELETE	3.4. CITY	51-ZIP	Change Addition
NAME			hand tractife.		i	Li cuange Li Addition
STREET ADORESS				4.2 NAME	1000-00	
				4 3 STREET		
CITY-ST-ZIP TITLE			☐ DELETE	4.4 CITY-5	T-ZIP	
i I			☐ DELETE	51 TITLE	İ	Change Addition
NAME				5.2 NAME		
STREET ADDRESS				5 3 STREET		
CITY-ST-ZIP			CT Builte	5.4 CITY - S	T- ZIP	
TITLE			DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME				6.2 NAME		
STREET ADDRESS				6.3 STREET	ADDRESS	
CITY-ST-ZIP				6.4 CITY - S		
14. I hereby co	ertify that the information supplied v	vith this filing doc	s not qualify f	for the exemp	tion state	od in Section 119.07(3)(i), Florida Statutes. I further certify that the information

indicated on this annual report or supplicmental 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.

MAJNICE D. BIERLY

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