

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

FILED

Feb 10 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 # P96000007267 (3)

1. Corporation Name  
NORTHBAY I & E, INC.

Principal Place of Business

311 CAROLINA AVE.  
LYNN HAVEN FL 32444

Mailing Address

311 CAROLINA AVE.  
LYNN HAVEN FL 32444-1242

3. Date Incorporated or Qualified

01/19/1996

3a. Date of Last Report

2. Principal Place of Business

21 3433 NEW CHURCH ROAD

2a. Mailing Address

27 Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 SOUTHPORT, FL

Zip

24 32409

25 BAY

Suite, Apt. #, etc.

28 City & State

Zip

29 Country

30

4. FEI Number

59-3355574

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

CANNON, BARBARA J  
311 CAROLINA AVE  
LYNN HAVEN FL 32444

10. Name and Address of New Registered Agent

81 Name

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

3433 NEW CHURCH ROAD

83

84 City

SOUTHPORT

FL

85 Zip Code

32409

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

Barbara J. Cannon

(NOTE: Registered Agent signature required when reinstating)

01/16/97

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME CANNON, BARBARA J  
STREET ADDRESS 311 CAROLINA AVE.  
CITY-ST-ZIP LYNN HAVEN FL 32444

TITLE  
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
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:

Barbara J. Cannon

01/16/97

Date

Daytime Phone #

CR2E034 (9/96)