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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 21 1997 8:00am

Secretary of State

197 813 725 0939

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000049799 (5)

BAYSIDE LENDERS, INC.

SIGNATURE:

Floresing Eliza	of Desirons	Mollico Addrono							
Principal Place of Business		2451 MCMULLEN BOOTH R	Mailing Address						
2451 MCMULLEN BOOTH RD CLEARWATER FL 34618			CLEARWATER FL 34619-1356						
						3. Date Incorporated or Qualified 06/10/1996	3a. Dat	e of Last R	eport
2. Principal Pla 21	ace of Business	2a. Mailing Address 26		•		4. FEI Number 59338013	4		plied For ot Applicable
Suite, Apt. 1	ŧ, elc	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A	
City & State)	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip	Country	Zıp	Cou	intry		8. This corporation has liability for			. 199.032,
24	25		30			1	Yes		
	9. Name and Address of Currer	it Registered Agent		81	Name	10. Name and Address of New Re	gistereo A	gent	
	NEDY, BRIAN J								
2451 MCMULLEN BOOTH RD CLEARWATER FL 34619				82	2 Street Address (P.O. Box Number is Not Acceptable)				
CLEA	TOTALLO I L OTO IP			B3					
				84	City			85 Zip (Code
				Ш		orporation submits this statement for the p	<u>FL</u>		- '
office or re agent. Lar SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the oblig	of Florida. Such change was a lations of, Section 607.0505, Flor	uthorize rida Sta	d by tutes	the corpor	ration's board of directors. I hereby acces	pt the appo	intment as	registered
	Signature, typed or printed name of registered age	ent and title if applicable (NOTE) ID DIRECTORS	Registere	d Age	nt signature rec	quired when reinstating) ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS (N. 12
12.	D	DELETE	1.1 T	ĭŢĻ€		ADDITIONS/CHANGES TO OFFIC	ACTIO AIVD	Change	Addition
NAME	KENNEDY, BRIAN J		1.2 N	IAME				-	
STREET ADDRESS	2451 MCMULLEN BOOTH RD		1,3 \$	TREET	ADDRESS				
CITY-ST-Z-P	CLEARWATER FL 34819		1.4 0	HTY-S	T-ZIP		 		
101LF	D	☐ DELETE	2.1 T	ITLE				L Change	Addition
NAME	MARVIN, TIMOTHY E		22 N						
STREET ADDRESS	2451 MCMULLEN BOOTH RD				ADDRESS				
CITY - ST - ZIP	CLEARWATER FL 34619	DELETE	2 4 C		ST - ZIP			Change	Addition
TITLE NAME			32 N				'	CT Oversign	riodiuon
STREET ADDRESS			1		ADDRESS				
City-\$1-7iP			3.4.0	CITY-	ST-ZIP				
TITLE		DELETE	4.1 T					Change	Addition
NAME			4.21	NAME					
STREET ADDRESS			4.3 S	TREET	ADDRESS	•			
CITY - ST - ZiP		DELETE	_		T-ZIP			Change	Latellian
TITLE		☐ DELETE	5.1 T		j			Change	Addition
NAME				IAME	4000000				
STREET ADORESS					ADDRESS				
CITY - ST - ZIP		DELETE	5.4 U	OTY-S)1-ZIF			Change	☐ Addition
NAME		**************************************		IAME				-	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP					ST-ZIP				
14 I do beref	by certify that the information supplie	ed with this filing does not qualif	v for the	exe	motion sta	ted in Section 119.07(3)(i), Florida Statute hat my signature shall have the same leg	s. I further	certify that	the
Lam an o	ri Indicated on this annual report or flicer or director of the corporation on the Block 12 or Block 13 if changed, o	or the receiver or trustee empowe	ered to	exec	cute this rep	port as required by Chapter 607, Florida	Statutes; ar	nd that my	name