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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600049820 (9) BAXTER-MCGILL, INC.  Principal Place of Business Mailing Address 6008 BAY ISLES DRIVE 6008 BAY ISLES DRIVE					
BOYNTON BEACH FL 33437 BOYNTON BEACH FL 3343			37-4108		
				3. Date incorporated or Qualified 06/10/1996	3a. Date of Last Report
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 26 Suite, Apt #, etc		Suite, Apt. #, etc.	······································	65-0694718	Not Applicable  \$8.75 Additional
22		27	: 	5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zφ	Country	Zip	Country	B. This corporation has liability for	intangible tax under s. 199.032,
24	25 Name and Address of Curren	29	30	Florida Statutes  10. Name and Address of New Re	Yes No
PAV		r registered Agent	B1 Name	10. Manie siro Modress of Mew M	igistereti Agent
BAXTER, FRED 6008 BAY ISLES DRIVE BOYNTON BEACH FL 33437			B2 Street Addr	ress (P.O. Box Number is Not Acceptal	hlai
				BOS (F.O. BOX NUMBER IS NOT ACCEPTA	
			83		
			24 City	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	FL 85 Zip Code
11. Pursuant to	o the provisions of Sections 607.050	2 and 607.1508, Florida Statuti	es, the above-named corp	poration submits this statement for the	ourpose of changing its registered
office or re	gistered agent, or both, in the State in familiar with, and accept the obliga	of Florida, Such change was a	uthorized by the cornoral	ion's board of directors. I hereby acce	pt the appointment as registered
SIGNATURE					
	Signature, typed or punied name of registered age		: Registered Agent signature requi		DATE
12.	OFFICERS ANI	DELETE	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12  Change
NAME	MCGILL, ALAN	(m) bearing	1.2 NAME		
STREET ADDRESS	6008 BAY ISLES DRIVE		1.3 STREET ADDRESS		
CHY-SI-7P	<b>BOYNTON BEACH FL 33437</b>		14 CITY-ST-ZIP		
TIFLE	D	DELETE	2.1 TITLE		Change  Addition
NAME	BAXTER, FRED		2.2 NAME		
STREET ADDRESS	6008 BAY ISLES DRIVE BOYNTON BEACH FL 33437		2.3 STREET ADDRESS		
CITY - ST - ZIP	DUTNION DEACH PL 3343/	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME			32 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY ST-ZIP			3.4. CITY: ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME	ř	
STREET ADDRESS			4.3 STREET ADDRESS	•	
CITY - ST - ZIF		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		_
SIREET ADDRESS			5.3 STREET ADDRESS		
CiTY+ST-ZIP			5.4 CITY- ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		. Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-S1-ZIF	w certify that the information europie	d with this filing does not quali	6.4 CiTY-\$T-ZiP	d in Section 119.07(3)(i), Florida Statute	es. I further certify that the
information	n indicated on this annual report or s ficer or director of the corporation or	unnlamental annual tenori is t	rue and accurate and tha	t my signature shall have the same leg	al effect as if made under oath: tha

SIGNATURE:

0321036

**FILED** 

May 05 1997 8:00am

Secretary of State