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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P96000051587**1. Corporation Name

BAYSIDE VENTURES, INC.

FILED Jan 27, 1999 8:00am **Secretary of State**

01-27-1999 90023 040 ***150.00



District Discontinuos Mailing Address							
Principal Place of Business	Mailing Address			,			
6325 BIG DADDY DRIVE	6325 BIG DADDY DRIVE						
PANAMA CITY BEACH FL 32407	PANAMA CITY BEACH FL 32407		DO NOT WRITE IN THIS SPACE				
				3. Date Incorporated or Qualifed			
				06/14/1996			
2. Principal Place of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied For	
21	26	26		59-3430681		Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	- \$8.75 ² Additional Fee Required		
City & State	City & State	City & State		6. Election Campaign Financing \$5.00 May Be		.00 May Be	
23	28	28		Trust Fund Contribution.	Ad	ded to Fees	
Zip Country	Zip	Zip Country		8. This corporation owes the current year Int	tangible	_	
24 25	29 30	29 30		Personal Property Tax.	Yes	□No	
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
BURTON, DOROTHY 6325 BIG DADDY DRIVE			Name	· ·			
			Street Address (P.O. Box Number is Not Acceptable)				
PANAMA CITY BEACH FL 32407		83					
		84	City	FL	85	Zip Code '	
11. Pursuant to the provisions of Sections 6 office or registered agent, or both, in the	07.0502 and 607.1508, Florida Statutes, t State of Florida. Such change was autho	the above orized by	e-named corpo the corporation	oration submits this statement for the purpose of n's board of directors. I hereby accept the appo	changin intment a	ig its registered as registered	

agent. Fam familiar with, and accept the obligations of, cooled for 10000, Florida cultures.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE DATE								
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	D D DELETE	1.1 TITLE	☐ Change ☐ Addition					
NAME	BURTON, DOROTHY	1.2 NAME						
STREET ADDRESS	6325 BIG DADDY DRIVE	1.3 STREET ADDRESS						
CITY-ST-ZIP	PANAMA CITY BEACH FL 32407	1,4 CITY-ST-ZIP						
TITLE	DELETE	2.1 TITLE	☐ Change ☐ Addition					
NAME		2.2 NAME						
STREET ADDRESS		2.3 STREET ADDRESS						
CITY-ST-ZIP	s syspect stage	2.4 CITY-ST-ZIP						
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition					
NAME		3.2 NAME	·					
STREET ADDRESS	The state of the s	3.3 STREET ADDRESS	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1					
CITY-ST-ZIP		3.4. CITY-ST-ZIP	· . 不知 自然的概算 (4) . 类性毒素的的特色					
TITLE	. DELETE	4.1 TITLE	☐ Chánge , ' ☐ Addition					
NAME	lander of the second of the se	4. 2 NAME						
STREET ADDRESS		4.3 STREET ADDRESS	•					
CITY-ST-ZIP		4.4 CITY-ST-ZIP						
TITLE	DELETE	5.1 TITLE	☐ Change ☐ Addition					
NAME		5.2 NAME						
STREET ADDRESS		5.3 STREET ADDRESS	•					
CITY-ST-ZIP		5.4 CITY-ST-ZIP						
TITLE (1)	DELETE	6.1 TITLE	☐ Change ☐ Addition					
NAME		6.2 NAME	ļ					
STREET ADDRESS		6.3 STREET ADDRESS						
* *	progenities to the transfer of the contract of	A 4 0071 07 710	i					

14. I 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, with all other like empowered.