


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

FILED
May 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000053436 (7)**
1. Corporation Name
MEC BAY CO.



Principal Place of Business 12908 AIR WAY ST. PANAMA CITY FL 32404 US	Mailing Address 12908 AIR WAY ST. PANAMA CITY FL 32404 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 12908 Air Way Street Suite, Apt. #, etc. 22 City & State 23 Panama City, FL Zip Country 24 32404-2833 25 US		2a. Mailing Address 26 12908 Air Way Street Suite, Apt. #, etc. 27 City & State 28 Panama City, FL Zip Country 29 32404-2833 30 US		3. Date Incorporated or Qualified 06/24/1996	
		4. FEI Number 59-3390205		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent YOUNG, JUDITH C 12908 AIR WAY ST. PANAMA CITY FL 32404				10. Name and Address of New Registered Agent 81 Name Judith C. Young 82 Street Address (P.O. Box Number is Not Acceptable) 12908 Air Way Street 83 84 City Panama City, FL 85 Zip Code 32404-2833			
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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 set, Section 607.0505, Florida Statutes.

SIGNATURE

Judith C. Young

(NOTE: Registered Agent signature required when reinstating)

DATE

4-16-98

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DP	<input type="checkbox"/> DELETE		1.1 TITLE	DP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	YOUNG, DAVID F			1.2 NAME	Young, David F.		
STREET ADDRESS	12908 AIR WAY ST.			1.3 STREET ADDRESS	12908 Air Way Street		
CITY-ST-ZIP	PANAMA CITY FL			1.4 CITY-ST-ZIP	Panama City, FL 32404-2833	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	VS	<input type="checkbox"/> DELETE		2.1 TITLE	VS	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	YOUNG, JUDITH C			2.2 NAME	Young, Judith C.		
STREET ADDRESS	12908 AIR WAY ST.			2.3 STREET ADDRESS	12908 Air Way Street		
CITY-ST-ZIP	PANAMA CITY FL			2.4 CITY-ST-ZIP	Panama City, FL 32404-2833	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	VT	<input type="checkbox"/> DELETE		3.1 TITLE	VT	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HUGHEY, BONNIE J.			3.2 NAME	Hughey, Bonnie J.		
STREET ADDRESS	1500 SAN REMO AVE., STE. 239			3.3 STREET ADDRESS	18495 S. Dixie Hwy., B102		
CITY-ST-ZIP	CORAL GABLES FL			3.4 CITY-ST-ZIP	Miami, FL 33157	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

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.

SIGNATURE:

Judith C. Young

4-20-98

CR2E034 (10/97)