

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000085112

Entity Name: BAK PROPERTIES, INC.

FILED  
Apr 20, 2006  
Secretary of State

## Current Principal Place of Business:

2528 SHERIDAN DRIVE  
SARASOTA, FL 34239 US

## New Principal Place of Business:

1267 15TH STREET  
SARASOTA, FL 34236 US

## Current Mailing Address:

P.O. BOX 5743  
SARASOTA, FL 34277

## New Mailing Address:

P.O. BOX 3497  
THERE IS NO MAILBOX AT 15TH ST/USE PO BOX  
SARASOTA, FL 34230

FEI Number: 65-0705238

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HIGBEE, ANN M  
2528 SHERIDAN DRIVE  
SARASOTA, FL 34239 US

## Name and Address of New Registered Agent:

HIGBEE, ANN M  
1267 15TH STREET  
SARASOTA, FL 34236 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ANN M. HIGBEE

04/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: HIGBEE, ANN M  
Address: 2528 SHERIDAN DRIVE  
City-St-Zip: SARASOTA, FL 342394822

Title: VP ( ) Delete  
Name: HIGBEE, WILLIAM K.  
Address: 2528 SHERIDAN DRIVE  
City-St-Zip: SARASOTA, FL 34239

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: HIGBEE, ANN M  
Address: PO BOX 3497  
City-St-Zip: SARASOTA, FL 34230 US

Title: VP (X) Change ( ) Addition  
Name: HIGBEE, WILLIAM K.  
Address: PO BOX 3497  
City-St-Zip: SARASOTA, FL 34230 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANN M. HIGBEE

PRES

04/20/2006

Electronic Signature of Signing Officer or Director

Date