Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90054 042 \*\*\*150.00

## 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 # P96000085261

Corporation	BAY COMMUNICATIONS, (						
Principal Place	e of Business	Mailing Address			1 19911991 11 81118 81111 88111 88111 88111	)) 18161 BILLS 11816 1	T1181 1181 1881
1133 FOURTH STREET 1133 FOURTH STR SARASOTA FL 34236 SARASOTA FL 342					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 10/14/1996		
2. Principal Pl	ace of Business	2a. Mailing Address	. Mailing Address		4. FEI Number		olied For
21		26			65-0701062		t Applicable
Suite, Apt. #, etc Suite, Apt. #, etc 22			tc		5. Certifcate of Status Desired	<b>\$8.75</b> A	
	City & State City & State				6. Election Campaign Financing	\$5.00 1	Мау Ве
23 28					Trust Fund Contribution	Added to	ว Fees
Zip	Country	Zip		untry	8. This corporation owes the current year li		_
24	25 29 30				Personal Property Tax.		□No_
9. Name and Address of Current Registered Agent 10					10. Name and Address of New Registered	d Agent	
DRAKE, J. KEVIN 1343 MAIN STREET				81 Name 82 Street A	Jerry L. Busiere  Idress (P.O. Box Number is Not Acceptable)  6301 26th Ave. E.		
SUITE 204				83			
SARASOTA FL 34236				84 City	Bradenton, FL 34208	85 Zip C	ode
				1 1	<u> </u>		
agent. I a	m tamiliar with, and accept the obliga	tions of, Section 607.050	Statutes, the a was authorize 05, Florida Sta	above-named of d by the corporatutes.	corporation submits this statement for the purpose or ration's board of directors. I hereby accept the app	of changing its regularity	registered jistered
SIGNATURE Signature, type of printed name of registered agent and title if applicable. (NOTE: Registered a				d Agent signature re	quired when reinstating) DATE		
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTO	RS IN 12
TITLE	D	☐ DELE	ETE 1.1 T	TTLE		☐ Change	☐ Addition
NAME	INGARFIELD, EARL T	•	1.2 N	IAME			ļ
STREET ADDRESS	1343 MAIN STREE, SUITE 204		1.3 \$	TREET ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34236		•	CITY-ST-ZIP			
TITLE			TILE		Change	Addition	
NAME	REYNOLDS, JOSHUA E		2.2 N	IAME			
				STREET ADDRESS -			- j
	SARASOTA FL 34236			CITY-ST-ZIP			
CITY-ST-ZIP	UNITOUTA E STESS	☐ DELI		TITLE		Change	☐ Addition
				AME	•		
TOTAL			STREET ADDRESS				
STREET ADDRESS							
CITY-ST-ZIP		□ DELI		CITY-ST-ZIP	****	Change	Addition

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.

4.2 NAME 4.3 STREET ADDRESS

5.1 TTTLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

IGNATURE AND TYPED OR PRINTING MANUE OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

4/12/99

941) 365-0232

☐ Change

☐ Change

Addition

Addition

Daytime Phone #

VOC. 444 (00)