

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000091602

FILED
Apr 18, 2008
Secretary of State

Entity Name: BAILEY ENTERPRISES OF NORTH FLORIDA, INC.

Current Principal Place of Business:

4021 HALLIDAY LN
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

4021 HALLIDAY LN
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-3412003 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANT, MOORE, MACDONALD & WELLS, P.A.
50 N. LAURA STREET
SUITE 3100
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TATUM, SHARON B
Address: 2190 WOODS RIVER LN
City-St-Zip: DULUTH, GA 30097

Title: VP () Delete
Name: BAILEY, HENRY CLAY III
Address: 4021 HALLIDAY LN
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP () Delete
Name: BAILEY, JOHN W
Address: 4021 HALLIDAY LN
City-St-Zip: JACKSONVILLE, FL 32207

Title: ST () Delete
Name: BAILEY, DONALD R
Address: 4021 HALLIDAY LN
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOHN W. BAILEY

VP

04/18/2008

Electronic Signature of Signing Officer or Director

_____ Date