## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700002658 (7)

BAXLEY	SERVICES, INC.			1   <b>1   1   1   1   1   1   1   1   1  </b>	 	HA <b>aa</b> na ahan ahan ahan baha a
Principal Place of Business RT. 2 BOX 828 JAY Ft. 32565		Mailing Address RT. 2 BOX 828				<b>                                 </b>
JA1 FL 32565		JAY FL 32565		De	NOT WRITE IN TH	IIS RPACE
				3. Date Incorporated		
				01/06/1997		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For
21 13451 Hwy 89		26 P.O. Box 828 Suite, Apt. #, etc.		59-34/99	720	Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Statu		\$8.75 Additional Fee Required
City & State		City & State		1	6. Election Campaign Financing \$5.00 May Be	
23 DAY +	FloriDA		PRIDA	Trust Fund Contrib		Added to Fees
<sup>Zip</sup> 325		<sup>Zip</sup> 32565	30 USA	8. This corporation ov Personal Property	Tax due June 30.	Yes No
5414	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Addres	s of New Registere	d Agent
	EY, JOHN L		81 Name			
	<del>2 BOX-828-</del>		82 Street A	Address (P.O. Box Number is	Not Acceptable)	
JAT	FL <b>32</b> 565		83 /3	451 Hwy 89		
			]63]	•		
			84 City _			L 85 Zip Code 32365
				) A U	F	L 1.32565
	<del></del>					
11. Pursuant office or r	to the provisions of sections 607.05 registered agent, or both, in the Stat	02 and 607.1508, Florida Statut le of Florida, Such change was	es, the above-named co	orporation submits this stateme	ent for the purpose of	changing its registered
11. Pursuant office or ragent. I a	to the provisions of sections 607.05 registered agent, or both, in the Statem familiar with, and accept the obtain	02 and 607.1508, Florida Statut le of Florida. Such change was gnions of, section 607.0505, Fl	es, the above-named co authorized by the corporation of the corporatio	orporation submits this stateme oration's board of directors. I h	_	changing its registered ointment as registered
agent. I a	am familiar with, and accept the obli-	grions of, section 607.0505, Fi	orida Statutes.		_	changing its registered ontment as registered
agent. I a	am familiar with, and accept the obtained spiritual name of registered ag	genons of, section 607.0505, Fi	orida Statules,  OTE: Registered Agent signatur	e raquired when reinstating)	9- DATE	changing its registered ointment as registered
signature	am familiar with, and accept the obli-	gamons of, section 607.0505, Fig. 1990, 19	OTE: Registered Agent signatur  13.	e raquired when reinstating)	9- DATE	changing its registered ointment as registered  85 98  AND DIRECTORS IN 12
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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.

6.3 STREE1 ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

John Li Bareley

9.25.98

850675-4459

**FILED** 

Sep 30 1998 8:00am

Secretary of State