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

FILED
Jun 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000021851 (5)

1. Corporation Name
BAY AREA DEVELOPMENT CORP.

Principal Place of Business
1219 FALCON DRIVE
DUNEDIN FL 34698

Mailing Address
1219 FALCON DRIVE
DUNEDIN FL 34698

DO NOT WRITE IN THIS SPACE

OMIT EEON BY ACCOUNT

3. Date Incorporated or Qualified
03/11/1997

4. FEI Number
59-3431231

Applied For / Not Applicable

2. Principal Place of Business
21 1625 St. Catherine Dr. W.
Suite, Apt. #, etc.
22
City & State
23 Dunedin, FL.
Zip 24 34698 Country 25 US

2a. Mailing Address
26 1625 St. Catherine Dr. W.
Suite, Apt. #, etc
27
City & State
28 Dunedin, FL.
Zip 29 34698 Country 30 US

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☑ Yes ☐ No

9. **Name and Address of Current Registered Agent**
PACE, JOSEPH K
1219 FALCON DRIVE
DUNEDIN FL 34698

10. **Name and Address of New Registered Agent**
81 Name Joseph Pace
82 Street Address (P.O. Box Number is Not Acceptable) 1625 St. Catherine Dr. W.
83
84 City Dunedin FL 85 Zip Code 34698

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 of, Section 607.0505, Florida Statutes.

SIGNATURE Joseph K. Pace
Signature of Officer or Director of the Registered Agent Firm, if Applicable (NOTE: Registered Agent signature required when refiling) DATE

12. OFFICERS AND DIRECTORS

TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRES/OWNER ☐ Change ☑ Addition
1.2 NAME	Joseph Pace
1.3 STREET ADDRESS	1625 St. Catherine Dr. W.
1.4 CITY-ST-ZIP	Dunedin, FL. 34698
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	ENTERED & POSTED
6.3 STREET ADDRESS	06/17/98-0100-016
6.4 CITY-ST-ZIP	$150.00

6/15

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: Joseph K. Pace

CR2E034 (10/97)