

FILED  
May 13, 2004 8:00 am  
Secretary of State

05-13-2004 90012 025 \*\*\*150.00

2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

DOCUMENT # P97000027265

1. Entity Name  
BAYSIDE MANAGEMENT GROUP, INC.



Principal Place of Business  
17 W CEDAR STREET  
SUITE 2  
PENSACOLA, FL 32501

Mailing Address  
PO BOX 940  
GULF BREEZE, FL 32562

54054176



2. Principal Place of Business

2800 Delano St.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05102004

Chg-P

CR2E034 (10/03)

City & State

Pensacola FL

City & State

4. FEI Number

59-3456434

Applied For

Not Applicable

Zip

32505

Country

US

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BRANNEN, DAVID A  
401 EAST CHASE STREET  
SUITE 105  
PENSACOLA, FL 32501

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

2800 Delano St.

City Pensacola

FL

Zip Code

32505

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*David A. Brannen*

David A. Brannen, Pres

5/15/04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinsating)

DATE

FILE NOW!!! FEE IS \$150.00  
Due by September 8, 2004

9. Election Campaign Financing  
Trust Fund Contribution.

☐ \$5.00 May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME BRANNEN, DAVID A  
STREET ADDRESS 17 W CEDAR STREET, SUITE 2  
CITY-ST-ZIP PENSACOLA, FL 32501

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 2800 Delano St.  
CITY-ST-ZIP Pensacola, FL 32505

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*David A. Brannen*

David A. Brannen, Pres

5/15/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

850-434-7700