## 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 # P97000077549

1. Corporation Name

HR BAYSIDE OFFICE, INC.

Principal	Place	of	Business
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Mailing Address

15201 ROOSEVELT BLVD. SHITE 112

15201 ROOSEVELT BLVD., SUITE 112

## FILED May 08, 1999 8:00 am Secretary of State

05-08-1999 90060 013 \*\*\*158.75



CLEARWATER FL 33760	CLEARWATER FL 33760			DO NOT WRITE IN	THIS SPACI	E
•				3. Date Incorporated or Qualifed 09/05/1997		_
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21	26			59-3474963		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		_	5. Certificate of Status Desired		75 Additional se Required
City & State	City & State			6. Election Campaign Financing Trust Fund Contribution		.00 May Be ided to Fees
Zip Country 24 25	Zip Col	untry		This corporation owes the current ye     Personal Property Tax.	ar Intangible ☐ Ye:	
9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Regist	ered Agent	_
HAYDON, ROGERS K.		81	Name			
15201 ROOSEVELT BLVD., SUITE 1	12	82	Street Addre	ss (P.O. Box Number is Not Acceptable)		_
CLEARWATER FL 33760		83	_			
		84	City		FL 85	Zip Code

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			
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable (NOTE: I	Registered Agent signature re	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D DELETE	1,1 TITLE	☐ Change ☐ Addition
NAME	RUBIN, LESLIE A	1.2 NAME	
STREET ADDRESS	15201 ROOSEVELT BLVD., SUITE 112	1.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 33760	1.4 CITY-ST-ZIP	
TITLE	D DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	HAYDON, ROGERS K JR.	2.2 NAME	
STREET ADDRESS	15201 ROOSEVELT BLVD., SUITE 112	2.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 33760	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4. CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Additio
NAME		5.2 NAME	
STREET ADORESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Additio
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
14 I hereby o	ertify that the information supplied with this filing does not qualify for	the exemption stated	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information

Indicated on this annual report or supplied with this limit does not qualify for the exemple 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 of 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 my an attachment with an address, with all other like empowered.

SIGNATURE: