Aug 10, 1999 8:00 am Secretary of State

08-10-1999 90010 006 ***550.00

Addition

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 # P98000058086

1. Corporation Name

| BAYWAT | CH HOMEBUYERS, INC. | | | | | | |
|---|---|--|---------------------------------------|-------------|--|--|--------------------|
| Principal Place | of Business | Mailing Address | | | | ##18: #1181 181 1 1 95 181 1 | INITE MAIN INDA |
| 4402 ROUND LAKE COURT 4402 ROUND LAKE COURT TAMPA FL 33624 TAMPA FL 33624 | | | | | DO NOT WRITE IN | THIS SPACE | |
| | | | | | 3. Date Incorporated or Qualifed 06/29/1998 | | |
| | | 0- Mailine Address | | | 4. FEI Number | Anu | olied For |
| 1 . | ace of Business | 2a. Mailing Address | | | 59-3560119 | ——··· | Applicable |
| 21 | # at- | Suite Ant # etc | Suite, Apt. #, etc. | | 37 3001(1 | \$8.75 A | |
| Suite, Apt. : | #, etc. | 27 | · · · · · · · · · · · · · · · · · · · | | 5. Certifcate of Status Desired | Fee Red | I |
| City & State | | | City & State | | 6. Election Campaign Financing | \$5.00 | May Ro |
| | | ⊢ ' | 28 | | Trust Fund Contribution | Added to | |
| Zip | Country Zip | | Country | | This corporation owes the current ye. | | |
| 24 | 25 29 30 | | 5 | • | Personal Property Tax. | | ØNo |
| 241 | 9. Name and Address of Current | | 7 | | 10. Name and Address of New Registe | ered Agent | |
| | | | | 1 Name | | | · |
| CORPORATION SERVICE COMPANY | | | | <u> </u> | Address (D.O. Bay Number is Not Assentable) | | |
| 1201 HAYS STREET | | | 8 | 2 Street / | Address (P.O. Box Number is Not Acceptable) | | • |
| TALLAHASSEE FL 32301-2525 | | | 8 | 3 | | | |
| • | | | L | | | T-1 | |
| | | | 8 | 4 City | | FL 85 Zip C | Code |
| office or re agent. I an | egistered agent, or both, in the State on familiar with, and accept the obligate state of registered agen | of Florida, Such change was authions of, Section 607.0505, Florida tand title if applicable. (NOTE: Re | orized to a Statuti gistered A | y the corpo | corporation submits this statement for the purpo cration's board of directors. I hereby accept the a country of the purpose of the country of the purpose of the country of the purpose of | TE | Jistereu |
| 12. | 011102101010101010101010101010101010101 | | 13. | | ADDITIONS/CHANGES TO OFFICER | S AND DIRECTOR | RS IN 12 Addition |
| TITLE | D, President | ☐ DELETE | 1.1 TITLE | | Vice President | Criange | [15] Addition |
| NAME | HUBBARD, SCOTT | | 1.2 NAME | | Hubbard, Patricia 4402 Round Leta Court | | |
| STREET ADDRESS | 4402 ROUND LAKE COURT | | 1.3 STREET ADDRESS | | 4402 Round Lette Court | | |
| City-St-ZiP | 71111 77 1 2 0002 7 | | 1.4 CITY | | Temps, FL 33624 | | C Addition |
| TITLE | | ☐ DELETE | 2.1 TITLE | | , | Change | Addition |
| NAME | | | 2.2 NAM | E | | | |
| STREET ADDRESS | | | 2.3 STR | ET ADDRESS | | | |
| CITY-ST-ZIP | | | _ | -ST-ZIP | | | C A (486 |
| TITLE | | ☐ DELET€ | 3.1 TITU | Ξ | | ☐ Change | Addition |
| NAME | | | 3.2 NAM | E | | | |
| STREET ADDRESS | | | 3.3 STREET ADDR | | | | |
| CITY-ST-ZIP | | | 3.4. CIT | -ST-ZIP | | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | | Change | ☐ Addition |
| NAME | | | 4. 2 NAM | ie . | | | |
| STREET ADDRESS | | | 4.3 STREET ADDR | | | | |
| CITY-ST-ZIP | | | 4.4 CITY | -ST-ZIP | | | |
| TITLE | | ☐ DELETE | 5.1 TITL | | | Change | Addition |
| NAME | | | 5.2 NAW | | | | |
| STREET ADDRESS | | | 5.3 STR | ET ADDRESS | | | |

CITY-ST-ZIP 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, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ DELETE

(813) 334-7443

Change