

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

APPROVED
99 APR 26 AM 8:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 98000092080
1. Corporation Name
Bailey and Company, Inc

Principal Place of Business
Key West

Mailing Address
6800 Maloney #38
Key West FL 33040

2. Principal Place of Business

21 6800 Maloney Ave L38
Suite, Apt. #, etc.

22 Key West FL
City & State

23 33040 US
Zip Country

24 33040 US
Zip Country

2a. Mailing Address

26 6800 Maloney
Suite, Apt. #, etc.

27 Key West FL
City & State

28 33040 U.S.
Zip Country

29 33040 U.S.
Zip Country

9. Name and Address of Current Registered Agent

William C Bailey
6800 Maloney Ave #38
Key West FL 33040

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

William C Bailey 4/1/99

12. OFFICERS AND DIRECTORS

TITLE President [DELETE]

NAME William C Bailey

STREET ADDRESS 6800 Maloney Ave L38

CITY-STATE-ZIP Key West FL 33040

TITLE Sec/Tres [DELETE]

NAME Theresa Bailey

STREET ADDRESS

CITY-STATE-ZIP

TITLE Sec/Tres [DELETE]

NAME Theresa Bailey

STREET ADDRESS 6800 Maloney Ave L38

CITY-STATE-ZIP Key West FL 33040

TITLE [DELETE]

NAME [DELETE]

STREET ADDRESS [DELETE]

CITY-STATE-ZIP [DELETE]

TITLE [DELETE]

NAME [DELETE]

STREET ADDRESS [DELETE]

CITY-STATE-ZIP [DELETE]

TITLE [DELETE]

NAME [DELETE]

STREET ADDRESS [DELETE]

CITY-STATE-ZIP [DELETE]

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

300002853013-8

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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)(b), 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.

SIGNATURE: W Bailey T. Bailey Sec/Tres. 4/1/99 305-294-6130
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11-99)