

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000103390

1. Entity Name
BAY FRAMING, INC.

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90025 021 ***150.00

Principal Place of Business

3812 7TH ST.
PANAMA CITY FL 32401

Mailing Address

3812 7TH ST.
PANAMA CITY FL 32401-5340

00037589

2. Principal Place of Business

Suite, Apt. #, etc.
341 S. MACARTHUR AVE

City & State
Panama City FL

Zip
32401

Country
BAH

3. Mailing Address

Suite, Apt. #, etc.
341 S. MACARTHUR AVE

City & State
Panama City FL

Zip
32401

Country
BAH



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3547864**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LISTER, WILLIAM G
3812 7TH ST.
PANAMA CITY FL 32401

Name
Lister, William G

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

341 S. MACARTHUR AVE

City **Panama City** **FL** Zip Code **32401**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/9/2000

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **LISTER, WILLIAM G**
STREET ADDRESS **3812 7TH ST.**
CITY-ST-ZIP **PANAMA CITY FL 32401**

TITLE **O.D.P** ☒ Change ☐ Addition
NAME **Lister, William G**
STREET ADDRESS **341 S. MACARTHUR AVE**
CITY-ST-ZIP **Panama City FL 32401**

TITLE **D** ☐ Delete
NAME **LISTER, DELLA L**
STREET ADDRESS **3812 7TH ST.**
CITY-ST-ZIP **PANAMA CITY FL 32401**

TITLE **O.D.S** ☒ Change ☐ Addition
NAME **LISTER, DELLA L**
STREET ADDRESS **341 S. MACARTHUR AVE**
CITY-ST-ZIP **Panama City FL 32401**

TITLE **O** ☒ Delete
NAME **Smith, Eric A**
STREET ADDRESS **5917 N. Leason**
CITY-ST-ZIP **Panama City FL 32408**

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

TITLE **O** ☒ Delete
NAME **Wood, Allan D**
STREET ADDRESS **618 Tate Dr.**
CITY-ST-ZIP **Panama City FL 32404**

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

TITLE **O.V** ☐ Delete
NAME **Rasnic, Frank**
STREET ADDRESS **119 Beach Woodway**
CITY-ST-ZIP **Panama City FL 32401**

TITLE **O.V** ☐ Change ☒ Addition
NAME **Rasnic, Frank**
STREET ADDRESS **119 Beach Woodway**
CITY-ST-ZIP **Panama City FL 32401**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **DELLA L Lister**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/2000
Date

850-769-3600
Daytime Phone #