## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

**FILED** Feb 24, 2002 8:00 am Secretary of State

02-24-2002 90004 038 \*\*\*150.00 1. Entity Name

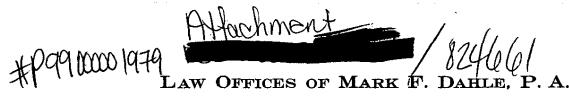
BayCo Industries, Inc.								
	DO NOT WRITE	E IN THIS SF	PAC	E				
2. Principal Place of Business 3. Mailing Address					1			
3565 Highway 17 South Suite, Apt. #, etc.		Post Office Box 676 Suite, Apt. #, etc.			4	DO NOT WRITE IN TH	IS SPAC	F
				<u> </u>				
City & Star Zolfo S	<sup>te</sup> prings, Florida	City & State Zolfo Springs,	, Flo	orida		FEI Number 55-0886471		Applied For Not Applicable
Zip 33890	Country USA	Zip 33890-0676	Coun USA		5. (	Certificate of Status Desired		75 Additional
	002.	30030 3070			7. Na	me and Address of Current Registe		<u> </u>
DO NOT WRITE				William Fred Bay III Street Address (P.O. Box Number is Not Acceptable) 3565 Highway 17 South				
	•			City Zolfo	Sm	rings F	L 3	ip Code 3890
8. The above	e named entity submits this statement f	or the purpose of changing its	registere					3030
	$\mathcal{M}$	O2 -	•	Ť	_			f 0000
SIGNATURE	Signature, typed or printed name of registored agen	t and big if applicable. (NOTE	: Registere	d Agent signature require	ed when re			6, 2002
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  January 1 - Ma After May 1, Amended				s \$550.00 s \$61.25		10. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees
11.		Make Check Payab	le to De	partment of St	ete			
TITLE	OFFICERS AND DIRECTORS William F. Bay,∷III, Director			<u> </u>				<del></del>
NAME	Post Office Box 676		NAM	ľ				
STREET ADDRESS CITY-ST-ZIP	1701to Springs Florida (3890-06/6			ET ADDRESS - ST- ZIP				
TITLE		<u></u>	TITLE		_	·		
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CITY-ST-ZIP				-ST-ZIP				
TITLE			TITLE					
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TITLE NAME			TITLE					
NAME STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			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 on an attachment with an address, with all other like empowered.

SIGNATURE: 🗷

SIENATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #



5150 SOUTH FLORIDA AVENUE BUILDING A, SUITE 105 POST OFFICE BOX 6629 LAKELAND, FLORIDA 33807-6629

MARK F. DAHLE

ALSO ADMITTED TO PRACTICE IN SOUTH CAROLINA AND BEFORE THE UNITED STATES TAX COURT TELEPHONE (863) 644-3307 TOLL FREE (800) 801-2228 FACSIMILE (863) 646-6992

E-MAIL: DAHLELAW@GTE.NET

MEMBER OF: NATIONAL NETWORK OF ESTATE PLANNING ATTORNEYS NATIONAL ACADEMY OF ELDER LAW ATTORNEYS

ACADEMY OF FLORIDA ELDER LAW ATTORNEYS

February 7, 2002

Division of Corporations
Post Office Box 1500
Tallahassee, Florida 32302-1500

FIRST CLASS MAIL

SUBJECT: BayCo Industries, Inc.

Dear Sir or Madam:

Enclosed please find the current Uniform Business Report for BayCo Industries, Inc. by which a correction in the federal employer identification number and registered agent are made. Also enclosed is my client's check number 4288 in the amount of \$150.00 as payment of the filing fee. Thank you for your assistance in this matter.

Very truly yours,

Law Offices of Mark F. Dahle, P. A.

Mark F. Dahle

C2083.21:rr Enclosures

cc: William F. Bay III, President