


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 02, 2004 08:00 AM
Secretary of State

DOCUMENT # S19777 1. Entity Name BAKER COMMERCIAL MAINTENANCE, INC.	
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Principal Place of Business 2699 FORSYTH ROAD STE. #111 ORLANDO FL 32807	Mailing Address 2699 FORSYTH ROAD STE. #111 ORLANDO FL 32807 US
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MOORE CR2E034 (11/03)

2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number 59-3043787	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

BAKER, FREDERICK K JR 2699 FORSYTH ROAD, SUITE 111 CASSELBERRY FL 32707
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7. Name and Address of New Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

B. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete	NAME BAKER, FREDERICK K., JR. STREET ADDRESS 2699 FORSYTH ROAD #111 CITY - ST - ZIP ORLANDO FL 32807
TITLE		<input type="checkbox"/> Delete	NAME STREET ADDRESS CITY - ST - ZIP
TITLE		<input type="checkbox"/> Delete	NAME STREET ADDRESS CITY - ST - ZIP
TITLE		<input type="checkbox"/> Delete	NAME STREET ADDRESS CITY - ST - ZIP
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TITLE		<input type="checkbox"/> Delete	NAME STREET ADDRESS CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME STREET ADDRESS CITY - ST - ZIP
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME STREET ADDRESS CITY - ST - ZIP
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME STREET ADDRESS CITY - ST - ZIP

U00000028658
02/04/04-80036-010 150.00

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *F.K. Baker, Jr.* **F.K. Baker, Jr. Pres. 1-29-04 407-339-8821**