

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 23, 2004 08:00 AM
Secretary of State

DOCUMENT# S59342 1. EntityName BAYTREEANTIQUES,INC.	
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PrincipalPlaceofBusiness 1847 NORTHWEST 57TH TERRACE GAINESVILLE, FL 32605	MailingAddress 1847 NORTHWEST 57TH TERRACE GAINESVILLE, FL 32605
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DO NOT WRITE IN THIS SPACE



02252004 NoChg-P CR2E034(10/03)

4. FEINumber 59-3069977	AppliedFor NotApplicable
5. CertificateofStatusDesired ☐	\$8.75 Additional FeeRequired

6. NameandAddressofCurrentRegisteredAgent

POLK,MARGARETM.
1847NORTHWEST57THTERRACE
GAINESVILLE,FL32605

**DO NOT WRITE
IN THIS SPACE**

8. Theabovenamedentitysubmitsthisstatementforthe purposeofchangingitsregisteredofficeorregisteredagent,orboth,intheStateofFlorida.Iamfamiliarwith,andaccept theobligationsofregisteredagent.

SIGNATURE _____ (NOTE RegisteredAgentsignaturerequiredwhenever installing) _____ DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. ElectionCampaignFinancing TrustFundContribution. ☐ \$5.00 MayBe AddedtoFees	U000000094644 03/23/04-80005-002 150.00
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10. OFFICERSANDDIRECTORS

TITLE NAME STREETADDRESS CITY-ST-ZIP	D POLK,MARGARETM. 1847N.W.57THTERRACE GAINESVILLE,FL
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12. IherebycertifythattheinformationsuppliedwiththisfilingdoesnotqualifyfortheexemptionstatedinSection119.07(3)(i),FloridaStatutes.Ifurthercertifythattheinformation indicatedonthisreportorsupplementalreportistrueandaccurateandthatmysignatureshallhavethesamelegaleffectasifmadeunderoath;thatIamanofficerordirector ofthecorporationorthereceiverortrusteeempoweredtoexecutehisreportasrequiredbyChapter607,FloridaStatutes,an dthatmynameappearsinBlock 10orBlock 11if changed,oronanattachmentwith anaddress,withallotherlikeempowered

SIGNATURE: Margaret M. Polk 3/21/04 (352) 466-3946
SIGNATUREANDTYPEDORPRINTEDNAMEOFSIGNINGOFFICERORDIRECTOR Date DaytimePhone#

Margaret M. Polk