FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

S90389

(5)

BAY CONSOLIDATED VENTURES, INC.

| Pal Place of Business | Mailing Address | |
|-----------------------|-----------------|--|
| | | |

FILED May 19 1998 8:00am Secretary of State



| | | | | | 1 | |
|---|--|--|----------------------------|--------------------|--|--|
| Principal Place of Business Mailing Address | | | | | | |
| 1002 WEST 23RD STREET 1002 WEST 23RD STREET | | | | | | |
| SUITE 400 SUITE 400 PANAMA CITY FL 32405 PANAMA CITY FL 32405 | | | DO NOT WRITE IN THIS SPACE | | | |
| FARMIN O | 11 16 32403 | FRIMMIN OFF TE JENUS | | | 3. Date Incorporated or Qualified | |
| | | | | | 10/28/1991 | |
| 2. Principal F | Place of Business | 2a. Mailing Address | | | 4. FEI Number Applied For | |
| 21 | | 26 | | | 59-3089550 Not Applicable | |
| Sulte, Apt. | #, etc. | Suite, Apt. #, etc. | | | AA == | |
| 22 | | 27 | | | 5. Certificate of Status Desired | |
| City & Star | te | City & State | | | 6. Election Campaign Financing \$5.00 May Be | |
| 23 | _ | 28 | | | Trust Fund Contribution Added to Fees | |
| Zip | Country | Zip | Count | ry | 8. This corporation owes or has paid the current year Intangible | |
| 24 | 25 | 29 | 30 | | Personal Property Tax due June 30. 🔀 Yes 🔲 No | |
| | 9. Name and Address of Curren | t Registered Agent | | | 10. Name and Address of New Registered Agent | |
| Н | ENRY, III, ROBERT F | | В | 1 Name | | |
| [10 | 002 W 23RD ST | | 8 | 2 Street | Address (P.O. Box Number is Not Acceptable) | |
| S' | TE 400 | | ľ | | riodisso (175, Box Hambor to Hot Hospitalor) | |
| P/ | ANAMA CITY FL 32405 | | 8 | 3 | | |
| | | | 8 | 4 City | 85 Zip Code | |
| | | | • | City | FL 85 Zip Code | |
| 11. Pursuant | to the provisions of Sections 607,0502 | 2 and 607,1508, Florida Statute: | s, the abo | ve-named | corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered | |
| Office or agent. I a | registered agent, or both, in the State am fam iliar with, and accept the obliga | of Florida. Such change was at itions of, Section 60 7.0505 . Flor | uthorized i ida Statut | by the corp es. | poration'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 | Signature, typed or printed name of registered ager | if and title if applicable (NOTE: | Registered A | gent signature | o required when reinstating) DATE | |
| 12. | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE | D | X DELETE | 1.1 TITLE | | Change Addition | |
| NAME | CHAPMAN, JOSEPH F., III | | 1.2 NAM | | | |
| STREET ADDRESS | 1002 W. 23RD ST #400 | | 1.3 STRE | ET ADDRESS | · | |
| CITY-ST-ZIP | PANAMA CITY FL | | 1.4 CITY | S1 - ZIP | | |
| TITLE | D | ☐ D€LETE | 2.1 TITLE | | Change Addition | |
| NAME | GLOVER, LEMUEL D., SR | | 22 NAM | | | |
| STREET ADDRESS | 530 NEW YORK AVE. | | 2.3 STRE | ET ADDRESS | | |
| CITY-ST-ZIP | LYNN HAVEN FL | | 2.4 CITY | -ST-ZIP | | |
| TITLE | 0 | DELETE | 3.1 TITLE | | ☐ Change ☐ Addition | |
| NAME | MAYO, CLINTON V. | | 3.2 NAMI | | | |
| STREET ADDRESS | 2916 FAIRMONT DR. | | 3,3 STRE | ET ADDRESS | | |
| CITY-ST-ZIP | PANAMA CITY FL | | 3.4. CITY | - ST- ZIP | | |
| TITLE | Ъ | DELETE | 4.1 TITLE | | Change Addition | |
| NAME | POWELL, RAYMOND | | 4. 2 NAM | E | | |
| STREET ADDRESS | 1002 W. 23RD ST #400 | | 4.3 STAE | ET ADDRESS | | |
| CITY-ST-ZIP | PANAMA CITY FL | | 4.4 CITY | ST-ZIP | | |
| TITLE | 0 | DELETE | 5.1 TITLE | | ☐ Change ☐ Addition | |
| NAME | SMITH, GEORGE H. | | 5.2 NAME | | | |
| STREET ADDRESS | 125 H.L. SUDDUTH DR. | | | ET ADDRESS | | |
| CITY-ST-ZIP | CALLAWAY FL | | 5.4 CITY | | | |
| TITLE | - ST | X DELETE | 6.1 TITLE | | DST X Change Addition | |
| NAME | HENRY, III, ROBERT F | | 6.2 NAME | | HENRY, III, ROBERT F. | |
| STREET ADDRESS | 1002 W 23 ST STE 400 | | 1 | ET ADDRESS | 1002 W. 23 ST, STE 400 | |
| | | | | | | |
| 14. I hereby | certify that the information supplied wi | th this filing does not qualify for | the exem | ption state | PANAMA CITY FI. ed in Section 119.07(3)(i), 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, if what all achieves with an address.

Henry, III Treasurer

4/27/98

(850)769-8981