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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secre ary of State DIVISION OF CORPORATIONS

Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90028 037 ***150.00

| DOC | JMENT | # \ | / /\ | 3763 |
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| Corporation | n Name | | | | | | | |
|---|--|-----------------------------------|------------------|---------------------|---------------------------------|---|-----------------|---|
| BAY BOI | T & INDUSTRIAL SUPPLY, | INC. | | | İ | | | |
| | | | | | | ###################################### | | |
| | | | | | | | | |
| Principal Flace of Business Mailing Address | | . – | | | | | | |
| PO BOX 15548 PO BOX 15548 PANAMA CITY FL 32406 PANAMA CITY FL 32406 US US | | | | | | | | |
| | | PANAMA CITY FL 32406 US | | | DO NOT WRITE IN THIS SPACE | | | |
| , | | 00 | | | 3. Date ncorpo | rated or Qualifed | | |
| | | | | | 01/24/199 | 2 | | |
| 2. Principal P | ace of Business | 2a. Mailing Address | | | 4. FEI Number | | | Apolied For |
| 21 2613 | N. EAST AVE. | 26 P.O. Box 35275 | | | 59-3101729 | | | Not Applicable |
| Suite, /vpt. | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of | Status Desired | | 5 Additional Required |
| 22 | | 27 Sit & State | | | | | | - |
| City & State | | City & State 28 PANAMA () | nu F | L | 6. Election Cam Trust Fund C | | | 00 May Be ed to Fees |
| 23 | MA CITY Th | 28 PANAMA (1) | Country | | | ion owes the current y | | 50 (3) 663 |
| 24 3240 | | 29 32412-5275 | n | A4 | Personal Pro | | Year intangible | □No |
| 24 0~10 | 9. Name and Address of Curren | | 50, | | | ddress of New Regis | stered Agent | |
| | | | 81 | Name | | | | ļ |
| | ARDS, DAN | | 82 | Street Add | Iress (P.O. Box Numb | per is Not Acceptable) | | |
| | N. EAST AVENUE | | | | | | | |
| PAN. | AMA CITY FL 32405 | | 83 | | | | | |
| | | | 84 | City | | | 85 Z | ip Code |
| | | | ŀ I | • | | | F-L | |
| 11. Pursuant | to the provisions of Sections 607.050 egistered agent, or both, in the State | 2 and 607.1508, Florida Statute | s, the above | -named cor | poration subrrits this | statement for the purp | ose of changing | its registered |
| agent I a | m familiar with, and accept the obliga | tions of, Section 607.0505, Flori | da Statutes. | ine corpo ai | ion a board or directo | S. Thoroby doop! the | , | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| SIGNATURE | <u> </u> | | | | | | | |
| 12. | Signature, typed or printed r ame of registered agei OFFICERS AN | | Registered Agent | t signature re-juir | ed when reinstating) | HANGES TO OFFICE | RS AND DIREC | TCRS IN 12 |
| TITLE | P | DELETE | 11 TITLE | | ABBIT CITOR | 1011020 10 011102 | ☐ Chan | |
| NAME | EDWARDS, DAN | | 12 NAME | | | | | |
| STREET ADDF ESS | 2013 N. EAST AVE. | | 1.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | PANAMA CITY FL | | 1.4 CITY-ST | | | | | |
| TITLE | 7711011117 5177 1 | ☐ DELETE | 2.1 TITLE | | | · · · · · · · · · · · · · · · · · · | ☐ Chan | ge |
| NAME | | | 2.2 NAME | | | | | |
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| CITY-ST-ZIP | | | 34 CITY-S | T-ZIP | | | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | | | ☐ Chan | ge 🔲 Addition |
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| STREET ADDF ESS | | | 4.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST | -ZIP | | | | |
| TITLE | | ☐ DELETE | 51 TITLE | | | | Chan | ge 🗌 Addition |
| NAME | | | 52 NAME | | | | | ļ |
| OTDEET ADDEEDO | | | 5.3 STREET | ADDRESS | | | | |

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0 (7(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplementa annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that am an office or director of the corporation or the receiver or trustee empowered to execute this report as required by Chap er 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

54 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDFESS

STREET ADDF ESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

DAN W. EDWARDS

850-784-4442

Change

☐ Addition