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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M52092

1. Corporation Name
B B & B MANAGEMENT CONSULTANTS, INC.

Principal Place of Business: 12011 CLEVELAND AVENUE. UNIT #6 FT. MYERS FL 33907
Mailing Address: 12011 CLEVELAND AVENUE. UNIT #6 FT. MYERS FL 33907



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/14/1987

2. Principal Place of Business 2a. Mailing Address

21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.

22. City & State 27. City & State

23. Zip Country 28. Zip Country

24. 25. 29. 30.

4. FEI Number 65-0017331 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

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

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

BAILEY, JOHN
11550 SW 25TH STREET
DAVIE FL 33325

10. Name and Address of New Registered Agent

81 Name: HOMER F. DOWNS #
82 Street Address (P.O. Box Number is Not Acceptable)
30 SPORTSMAN LANE
83
84 City: ROTONDA WEST FL 85 Zip Code: 33947

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation'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] HOMER F. DOWNS # 1/15/99

12. OFFICERS AND DIRECTORS

TITLE: PT BAILEY, JOHN
NAME: BAILEY, JOHN
STREET ADDRESS: 11550 SW 25TH ST
CITY-ST-ZIP: DAVIE FL

TITLE: VS BAILEY, JAMES
NAME: BAILEY, JAMES
STREET ADDRESS: 1861 N FED HWY #155
CITY-ST-ZIP: HOLLYWOOD FL

TITLE: [] DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: [] DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: [] DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: [] DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: P
1.2 NAME: LLOYD L. LATHROP JR.
1.3 STREET ADDRESS: 301 MUSKET RD.
1.4 CITY-ST-ZIP: CUMBERLAND FALLS, ME 04110

2.1 TITLE: V
2.2 NAME: MICHAEL J. DOHERTY
2.3 STREET ADDRESS: 28396 SOMBRENO DR. #4
2.4 CITY-ST-ZIP: BONITA SPRING FL 33923

3.1 TITLE: S T
3.2 NAME: HOMER F. DOWNS #
3.3 STREET ADDRESS: 30 SPORTSMAN LANE
3.4 CITY-ST-ZIP: ROTONDA WEST FL 33947

4.1 TITLE:
4.2 NAME:
4.3 STREET ADDRESS:
4.4 CITY-ST-ZIP:

5.1 TITLE:
5.2 NAME:
5.3 STREET ADDRESS:
5.4 CITY-ST-ZIP:

6.1 TITLE:
6.2 NAME:
6.3 STREET ADDRESS:
6.4 CITY-ST-ZIP:

14. 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 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, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] HOMER F. DOWNS # 1/15/99 941-697-5168

CR2E034 (11/98)