


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 08:00 AM
Secretary of State

DOCUMENT # P0100Q027099
 1. Entity Name
 BBB OF GAINESVILLE, INC.



Principal Place of Business
 3700 NW 91ST ST.
 GAINESVILLE, FL 32606

Mailing Address
 1700 MALVERN AVE.
 HOT SPRINGS NATIONAL, AR 71901



04102004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 71-0853919

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

BARNES, JAMES
 3700 NW 91ST ST.
 GAINESVILLE, FL 32606

DO NOT WRITE IN THIS SPACE

8. 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: *James Barnes* (NOTE: Registered Agent signature required when reinstating) DATE: *4-20-04*

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

000000154935
 05/05/04-80017-014 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BARNES, JAMES 959 WESTINGHOUSE DR. HOT SPRINGS NATIONAL, AR 71901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BARNES, TERRY 959 WESTINGHOUSE DR. HOT SPRINGS NATIONAL, AR 71901
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: *James Barnes* DATE: *4/20/04* DAYTIME PHONE #: *801 821-5699*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #