



2006 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Apr 24, 2006 8:00 am**  
**Secretary of State**

04-24-2006 90406 023 \*\*\*150.00

<b>DOCUMENT # P04000027537</b>					
<b>1. Entity Name</b> <b>B &amp; B BLOODSTOCK SOUTH INC.</b>					
<b>Principal Place of Business</b> C/O B & B BLOODSTOCK INC. 11 GINGER WOODS ROAD VALLEY, NE 68064			<b>Mailing Address</b> C/O B & B BLOODSTOCK INC. 11 GINGER WOODS ROAD VALLEY, NE 68064		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 42-1617839	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
<b>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.</b>					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	DPT GLASS, ORIS J JR 11 GINGER WOODS RD VALLEY, NE 68064 <input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	DVPS GLASS, BARBARA J 11 GINGER WOODS RD VALLEY, NE 68064 <input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	AS VANDENACK, MARY E 8712 WEST DODGE ROAD STE 300 OMAHA, NE 68114 <input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1701 County Road 6 Yutan, NE 68073-5001	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.</b>					
<b>SIGNATURE:</b> 			Oris J. Glass, Jr.		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

ATTACHMENT

40058804

**VANDENACK & WILLIAMS, LLC**

ATTORNEYS AT LAW  
1701 COUNTY ROAD 6  
YUTAN, NE 68073-5001  
TELEPHONE: (402) 625-2786  
FACSIMILE: (402) 625-2244

*From the Desk of:  
Mary E. Vandenack  
mvandenack@vwlawoffice.com  
Cell: (402) 321-2334*

April 19, 2006


Division of Corporations  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

Re: 2006 For Profit Corporation Annual Report  
B & B Bloodstock South Inc.  
Document # P04000027537

Dear Sir or Madam:

Enclosed for filing is the 2006 For Profit Corporation Annual Report for B & B Bloodstock South Inc. Also enclosed is a check in the amount of \$150.00 payable to Florida Department of State which represents the filing fee.

Sincerely,



Sandy Gianficaro  
LegalAssistant

Enclosures  
cc: Oris J. Glass, Jr.