2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 26, 2005 08:00 AM Secretary of State

ANNUAL REPORT				Sacratary of Sta	
DOCUMENT # P99000077216 1. Enlity Name B & B EQUIPMENT CO., INC.				Secretary of State	
3900 NARCI	SSUS AVE	Mailing Address 3900 NARCISSUS AVE			
SANFORD, F	L 32771	SANFORD, FL 32771]] - A Common and Texas (result of the contraction of the contraction of the section of the contraction of	
DO NOT WRITE IN THIS SPACE			CE	01182005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For	
_				59-3597219 Not Applicat	
	6. Name and Address of Current Reg	istered Agent		5. Certificate of Status Desired Fee Required	
BEHRENS, WARD 306 W. LAKEVIEW AVE. LAKE MARY, FL 32746 DO NOT WRITE IN THIS SPACE					
	named entity submits this statement for the tipos of registered agent. Signature, typed or printed name of registered egent and till	MAN BELLEN	ed office or register	red agent, or both, in the State of Florida. I am familiar with, and acce	
After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution.		.00 May Be ded to Fees	
10.	OFFICERS AND DIRI	EÇTORS	<u> </u>	-	
NAME	BEHRENS, GERALD				
STREET ADDRESS CITY-ST-ZIP	306 W. LAKEVIEW AVE. LAKE MARY, FL 32746			000001974 0 0 01/27/05-80008-022 150.00	
TITLE	D BEHRENS, WARD				
NAME STREET ADDRESS CITY-ST-ZIP	109 KAYWOOD DR. SANFORD, FL 32771				
TITLE	D PEUDENS CLAUDETTE W	_	.		
NAME STREET ADDRESS	BEHRENS, CLAUDETTE W 306 W. LAKEVIEW AVE.			DO NOT WOITE	
CITY-ST-ZIP	LAKE MARY, FL 32746] —	DO NOT WRITE	
TITLE NAME			ļ	IN THIS SPACE	
STREET ADDRESS					
CITY-SI-ZIP			<u> </u>		
TITLE NAME			Į.		
STREET ADDRESS					
CITY-ST-ZIP		,		· ·	
NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby of indicated of the corchanged	certify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empower, or on an attachment with an address, with	filing does not qualify for the exe and accurate and that my signa ed to execute this report as requi all other like empowered.	mption stated in Se ture shall have the red by Chapter 607	ection 119.07(3)(i). Florida Statutes. I further certify that the information same legal effect as if made under oath; that I am an officer or director, Florida Statutes, and that my name appears in Block 10 or Block 11	