

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # 258402	
1. Entity Name BI-RITE COMPANY, INC.	

Principal Place of Business KIME LEA SLATTON 6608 ADAMO DRIVE TAMPA, FL 33619 US	Mailing Address KIME LEA SLATTON 6608 ADAMO DRIVE TAMPA, FL 33619 US
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DO NOT WRITE IN THIS SPACE



01162006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-0998202	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent GAZZO, JOSEPH F III 6608 ADAMO DR TAMPA, FL 33619

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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

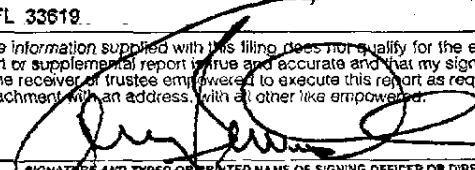
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	05/04/06-80009-007 158.75
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SLATTON, LOIS 11201 KNIGHTS GRIFFEN THONOTOSASSA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD SLATTON, KIME L 11206 LAKE SASSA DRIVE THONOTOSASSA, FL 33592
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT BEVILLE, TERRY 213 KINGS WAY DR TEMPLE TERRACE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MCCORMICK, KAREN 2118 MARJORY TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GAZZO, JOSEPH F III 2807 OLD BAYSHORE WAY TAMPA, FL 33611
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VO SLATTON, JAMES W 6608 ADAMO DR TAMPA, FL 33619

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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.

SIGNATURE: 	TERRY BEVILLE 4/19/06 PLS-LL35401
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #