

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 18, 2004 08:00 AM
Secretary of State

DOCUMENT # 575524

1. Entity Name
B AND B LINES, INC.



Principal Place of Business
1102 GULF AVE
CARRABELLE, FL 32322

Mailing Address
P.O. BOX 114
CARRABELLE, FL 32322



01202004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1842543

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BRAGDON, ALVA L
1102 GULF AVE
CARRABELLE, FL 32322

**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

Signature, typed or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**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

U00000055506
02/18/04-80004-003 150.00

10. OFFICERS AND DIRECTORS

TITLE PD
NAME BRAGDON, ALVA L
STREET ADDRESS 1102 GULF AVE
CITY-ST-ZIP CARRABELLE, FL 32322

TITLE VST
NAME BRAGDON, PATRICIA
STREET ADDRESS 1102 GULF AVE
CITY-ST-ZIP CARRABELLE, FL 32322

TITLE ST
NAME BRAGDON, PATRICIA
STREET ADDRESS 1102 GULF AVE
CITY-ST-ZIP CARRABELLE, FL 32322

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

Patricia A. Bragdon Patricia A. Bragdon 2/17/04

691-3503
Daytime Phone #