


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 05 FEB 16 AM 10:32

| | | | | | |
|---|---------------------------------------|---------------------|---|---|--|
| DOCUMENT # A04000000376 1. Entity Name B & G ENTERPRISES OF ANNA MARIA, LTD. | | | |  | |
| Principal Place of Business 515 83RD ST. HOLMES BEACH, FL 34217 | | | Mailing Address 515 83RD ST. HOLMES BEACH, FL 34217 | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | 02032005 Chg-LP CR2E003 (10/03) | |
| Zip | Country | Zip | Country | 4. FEI Number 80-0096177 | |
| 6. Name and Address of Current Registered Agent | | | | 7. Name and Address of New Registered Agent | |
| COPELAND, EUGENE H 515 83RD ST. HOLMES BEACH, FL 34217 | | | | Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ | |
| 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. | | | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small> | | | | | |
| 9. Capital Contributions as Shown on record. \$5,000.00 | | | 10. Amount of Capital Contributions in FLORIDA to date. | | |
| A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. | | | | | |
| 12. GENERAL PARTNER INFORMATION | | | | 13. ADDRESS CHANGES ONLY | |
| DOCUMENT # | NAME | | | STREET ADDRESS | |
| NAME | B & G ENTERPRISES OF ANNA MARIA, INC. | | | CITY-ST-ZIP | |
| STREET ADDRESS | 515 83RD ST. | | | | |
| CITY-ST-ZIP | HOLMES BEACH, FL 34217 | | | | |
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| CITY-ST-ZIP | | | | | |
| 14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes | | | | | |
| SIGNATURE: <u>Eugene H Copeland</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small> | | | | 02-17-05 941-728-7022 <small>Date Daytime Phone #</small> | |

STAPLE CHECK HERE

Handwritten initials



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