


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90216 025 ***150.00

DOCUMENT # F01000006555	
1. Entity Name B&W WHOLESALE DISTRIBUTORS, INC.	

Principal Place of Business 4500 SINGER ROAD MURFREESBORO, TN 37129	Mailing Address 4500 SINGER ROAD MURFREESBORO, TN 37129
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20042926



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04142005 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WATTS, PHIL <input type="checkbox"/> Delete 4500 SINGER ROAD MURFREESBORO, TN	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Mike Vermillion <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4500 Singer Road Murfreeseboro, TN 37129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST CONLEY, BRIAN <input type="checkbox"/> Delete 4500 SINGER ROAD MURFREESBORO, TN	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Susan Irvin <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4500 Singer Road Murfreeseboro, TN 37129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ENOCH, CHARLES <input type="checkbox"/> Delete 4500 SINGER ROAD MURFREESBORO, TN	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SMITH, JOHN <input type="checkbox"/> Delete 4500 SINGER ROAD MURFREESBORO, TN	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LEBLANC, BRENDA <input type="checkbox"/> Delete 4500 SINGER ROAD MURFREESBORO, TN	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WELLS, RONNIE <input type="checkbox"/> Delete 4500 SINGER ROAD MURFREESBORO, TN	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: D. Brian Conley Secretary D. Brian Conley 4-14-05 615 893860
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #