## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000001304

Entity Name: BUSINESS DEVELOPMENT PARTNERS OF TN, INC.

FILED Jan 25, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace Of Dusiliess.

1724 NW 36 CT 20324 SW 79 CT OAKLAND PARK, FL 33309 MIAMI, FL 33189

Current Mailing Address: New Mailing Address:

1724 NW 36 CT 20324 SW 79 CT OAKLAND PARK, FL 33309 MIAMI, FL 33189

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 STOVER, MELANIE
 STOVER, MELANIE

 1724 NW 36 CT
 20324 SW 79 CT

 OAKLAND PARK, FL 33309
 US

 MIAMI, FL 33189
 US

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.

SIGNATURE: 01/25/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: STOVER, MELANIE P (X) Change ( ) Addition Name: STOVER, MELANIE

 Name:
 STOVER, MELANIE
 Name:
 STOVER, MELANIE

 Address:
 1724 NW 36 CT
 Address:
 20324 SW 79 CT

 City-St-Zip:
 OAKLAND PARK, FL 33309
 City-St-Zip:
 MIAMI, FL 33189

Title: T ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 HARBER, JAMES
 Name:
 HARBER, JAMES

 Address:
 1724 NW 36 CT
 Address:
 20324 SW 79 CT

 City-St-Zip:
 OAKLAND PARK, FL 33309
 City-St-Zip:
 MIAMI, FL 33189

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MELANIE STOVER P 01/25/2005