

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 11, 2008 08:00 A
Secretary of State**

DOCUMENT # F39394

1. Entity Name
B.J. EXCAVATING ENTERPRISES, INC.



Principal Place of Business

**4651 ARNOLD AVENUE
NAPLES, FL 34104 US**

Mailing Address

**4651 ARNOLD AVENUE
NAPLES, FL 34104 US**



01082008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2113982

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BAVIELLO, MICHAEL A JR
1025 FIFTH AVENUE NORTH
NAPLES, FL 34102**

**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]
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

01/08/08
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	AUSTIN, MARK J
STREET ADDRESS	4651 ARNOLD AVE
CITY-ST-ZIP	NAPLES, FL 34104
TITLE	VPST
NAME	AUSTIN, MICHAEL J
STREET ADDRESS	4651 ARNOLD AVE
CITY-ST-ZIP	NAPLES, FL 34104
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/08/08

Date

(239) 643-3478

Daytime Phone #