2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H98698

1. Entity Name

B/W GENERAL CONTRACTORS, INC.

FILED Feb 18, 2008 08:00 AN Secretary of State

Principal Place of Business

714 MANATEE AVENUE EAST BRADENTON, FL 34208 US Mailing Address

714 MANATEE AVENUE EAST BRADENTON, FL 34208 US



02112008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2652571

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

WILLIAMS, BRITTON H 714 MANATEE AVENUE EAST BRADENTON, FL 34208

SIGNATURE: _

DO NOT WRITE IN THIS SPACE

Britton H. Williams 2/12/08 (941)748-8834

Date

Daytime Phone #

					and a control of the
 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, 2008 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			9 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	***		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD WILLIAMS, BRITTON H 3618 2ND AVENUE W. BRADENTON, FL 34205				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, EILEEN L 636 HILLCREST DRIVE BRADENTON, FL 34209		000000831943 02/27/08-80038-015 158.75		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CVPT REID, BRUCE 739 HILLCREST DRIVE BRADENTON, FL			NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MASON, PETER 1851 OLEANDER ST. SARASOTA. FL		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WILLIAMS, REACE 207 32ND ST W BRADENTON, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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 eath; 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.					