2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2007 08:00 AM
Secretary of State

DOCUMENT # J64347

1. Entity Name
B.M.C. SERVICES, INC.

Principal Place of Business	Mailing Address
7214 NORTH HUBERT TAMPA, FL 33614	7214 NORTH HUBERT TAMPA, FL 33614

DO NOT WRITE IN THIS SPACE

04302007 No Chg-P CR2E034 (11/06)

4. FEI Number
59-2821231
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

WHITAKER, MARIA E
7214 N. HUBERT AVE
TAMPA, FL 33614

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000763374
05/30/07-80007-010 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BAHR, RICK
STREET ADDRESS	4426 RIDGE LINE CIRCLE
CITY-ST-ZIP	TAMPA, FL
TITLE	STD
NAME	BAHR, ARDYTH
STREET ADDRESS	4426 RIDGE LINE CIRCLE
CITY-ST-ZIP	TAMPA, FL
TITLE	VD
NAME	WHITAKER, ROBERT
STREET ADDRESS	7214 NORTH HUBERT
CITY-ST-ZIP	TAMPA, FL
TITLE	VP
NAME	BURNEY, DWAYNE
STREET ADDRESS	7709 GIBSONTON DRIVE
CITY-ST-ZIP	GIBSONTON, FL 33534
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Robert Whitaker Robert Whitaker 4-30-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR V.P. DIRECTOR Date