


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2005 08:00 AM
Secretary of State

DOCUMENT # L08877	
1. Entity Name BETTER BUSINESS FORMS, INC.	

Principal Place of Business 10950 BELCHER ROAD LARGO, FL 33777 US	Mailing Address 10950 BELCHER ROAD P.O. BOX 250 PINELLAS PARK, FL 33780-250 US
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DO NOT WRITE IN THIS SPACE

01112005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2969301	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent KELLER, GARY W 10950 BELCHER ROAD LARGO, FL 33777	
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**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MCDERMOTT, NORBERT 10950 BELCHER ROAD LARGO, FL 33777
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOGAN, PAUL 10950 BELCHER ROAD LARGO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BAKER, JOSEPH P. 10950 BELCHER ROAD LARGO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD KELLER, GARY W. 10950 BELCHER ROAD LARGO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/21/05-80066-021 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u>Gary W Keller</u> GARY W KELLER	Date: <u>1/18/05</u>	(727) <u>545 8703</u> x362
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		