

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00CORPORATION
ANNUAL REPORT
1995FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSAPPROVED
AND
FILED

95 MAY -1 PM 8:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDADOCUMENT # **L36407****(9)**

1. Corporation Name

B & C CONTRACTORS, INC.

Principal Place of Business

**37715 HARDWOOD AVE.
ZEPHYRHILLS FL 33541**

Mailing Address

**37715 HARDWOOD AVE.
ZEPHYRHILLS FL 33541**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
12/12/19893a. Date of Last Report
02/01/19944. FEI Number
59-2983864Applied For
Not Applicable5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐**\$5.00** May Be
Added to Fees8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 **8011 GALL BLVD**

Suite, Apt. #, etc.

22

City & State

23 **ZEPHYRHILLS FLA**

Zip

24 **33540**

Country

25 **PASCO**

2a. Mailing Address

26 **8011 GALL BLVD**

Suite, Apt. #, etc.

27

City & State

28 **ZEPHYRHILLS FLA**

Zip

29 **33541**

Country

30 **PASCO**

9. Name and Address of Current Registered Agent

**ROMAN, BRIAN
5708 9TH STREET
ZEPHYRHILLS FL 33540**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*Brian Roman***BRIAN ROMAN****4/29/95**

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DP
ROMAN, BRIAN A.
5708 9TH STREET
ZEPHYRHILLS FL**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DVS
ROMAN, CLARK J.
37715 HARDWOOD
ZEPHYRHILLS FL**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**ST
STOVER, RAYMOND
37152 RUTLEDGE
ZEPHYRHILLS FL**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Brian Roman***BRIAN ROMAN****4/29/95**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(Type or Print Name)

782 9154