


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2004 08:00 AM
Secretary of State

DOCUMENT # L78436 1. Entity Name BJC HOLDINGS, INC.	
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Principal Place of Business 5381 CLIFF STREET P O DRAWER 677 GRACEVILLE, FL 32440	Mailing Address 5381 CLIFF STREET P O DRAWER 677 GRACEVILLE, FL 32440
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02252004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3067143	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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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent WILDER, T W, III 5381 CLIFF STREET GRACEVILLE, FL 32440
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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 _____ (NOTE: Registered Agent signature required when reinstalling) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WILDER, TOM W. 2842 OLD CHIPLEY RD SLOCOMB, AL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILDER, T.W. I 4285 LAFAYETTE STREET MARIANNA, FL 32446
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD HEISLER, THOMAS E 5676 HWY 77 GRACEVILLE, FL 32440
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, F. J. DR 1501 EAST EIGHTH AV. GRACEVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, LEE W 101 8TH AVE GRACEVILLE, FL 32440
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

UD00000069987
03/01/04-80028-025 150.00

**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: Thomas E. Heisler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 27, 2004 850 263 3225
Date Daytime Phone #